Form 3160-5 (June 1990) UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT SUNDRY NOTICES AND REPORTS ON WELLS DO not use this form for proposals to drill or to deepen or reentry to a different reservice Use "APPLICATION FOR PERMIT—" for such proposals SUBMIT IN TRIPLICATE 1. Type of Well □ Qui Gas Weil □ Other 2. Name of Operator Checken No. P.O. Box //SO Mid/AMD Tx 4. Location of Well (Footage, Sec., T. R., M., or Survey Description) Unit C Unit C 660' FNL+ 1980' FWL	FORM APPROVED Budget Bureau No. 1004-0135 Expires: March 31, 1993 5. Lease Designation and Serial No. <u>LC -03/740-B</u> 6. If Indian, Allottee or Tribe Name 7. If Unit or CA, Agreement Designation <u>EUNICE</u> MUNIMENT South U, 8. Well Name and No. <u>284</u> 9. API Well No. <u>30-025-04561</u> 10. Field and Pool, or Exploratory Area
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SUBMIT IN TRIPLICATE 1. Type of Well Qui Gas Well Other 2. Name of Operator ChEURON U.S.A. INC. 3. Address and Telephone No. P.O. Box 1150 MidlAND TX 19707 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Unit C 660' FNL+ 1980' FWL	7. If Unit or CA. Agreement Designation EUNICE MUMERT South U, 8. Well Name and No. 284 9. API Well No.
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X Well Gas Well Other 2. Name of Operator Cheiner Cheiner 3. Address and Telephone No. Tx 79707 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Unit C 660' FNL + 1980' FWL	8. Well Name and No. 284 9. API Well No.
ChEURON U.S.A. INC. ³ Address and Telephone No. P.O. Box 1150 Midland TX 19702 ⁴ Location of Well (Footage, Sec., T., R., M., or Survey Description) Unit C 660' FNL + 1980' FWL	284 9. API Well No.
P.O. Box 1150 MidlAND TX 19707 ⁴ Localion of Well (Footage, Sec., T., R., M., or Survey Description) Unit C 660' FNL + 1980' FWL	
Unit C 660' FNL + 1980' FWL	30-00-09361
Unit C 660' FNL+ 1980' FWL	10. Field and Pool, or Exploratory Area
SEC 8 TAIS R36E	EUNICE MONUMENT G/SA 11. County or Parish, State LEA NM
2 CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, R	
I TPE UE SUBMISSION	
Notice of Intent Abandonment	TION
Abandonment	Change of Plans
Subsequent Report	New Construction
	Non-Routine Fracturing
Final Abandonment Notice Casing Repair Altering Casing	Water Shut-Off
Other SAZ ZONE #/ DERTS	Conversion to Injection
	(Note Report results of multiple completion on Well
Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*	Completion or Recompletion Report and Log form)
SET CIBPO 3885, SET CICR & 3740 SquEEZ 3790-3879. Drillout CEMENT & CICR + CIBP. PEEF 3840-3879 W/2 JHPF @ 180° phasing. Acidize W/15009 15°10 NEFE HCL. Return to production.	E-cement peefs
	SEP 17 8 10
	EIVED
I hereby certify that the foregoing is true and correct	
signed M. E. Kim Title DR. 9. Supt.	gliulan
Signed M. E. alin Dala C. J	Date 9/14/90