

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Injector		5. LEASE DESIGNATION AND SERIAL NO. LC-031740-B
2. NAME OF OPERATOR Chevron U.S.A. Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P.O. Box 670		7. UNIT AGREEMENT NAME Eunice Monument South Unit
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Unit F, 1980' FNL & 1980' FWL		8. FARM OR LEASE NAME
14. PERMIT NO.		9. WELL NO. 299
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3543' GL		10. FIELD AND POOL, OR WILDCAT Eunice Monument G/SA
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 9, T21S, R36E
		12. COUNTY OR PARISH Lea
		13. STATE NM

16.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <u>Convert to injector</u>	<input checked="" type="checkbox"/>

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

Deepened from 3870' to 3920'. Ran 4" 13.4# N80 (21 joints) liner set @ 3920 with top of liner @ 3275'. Cemented with 50 sacks class "C" 1.5% D-127, 1/4#/sack nut plug. Plug down 12:33 PM 9/7/86. Drilled out cement and float equipment. Tested liner and casing to 500 psi (OK). Perforated 3710' - 3897' (66 holes). Acidized with 4000 gallons 15% NEFE HCL. Equipped for injection with 2 3/8" IPC tubing and packer set @ 3658'. Tested casing and packer to 600 psi for 30 minutes. (OK). Well is shut-in pending completion of injection facilities. Work performed 9/6/86 - 10/12/86.

ACCEPTED FOR RECORD

[Signature]
OCT 24 1986

CARLSBAD, NEW MEXICO

18. I hereby certify that the foregoing is true and correct

SIGNED *[Signature]*

TITLE Division Drilling Manager

DATE 10-17-1986

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side