State of New Mexico
Enᵤ.ᵦ. , Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.
30-025-04583

5. Indicate Type of Lease
STATE ☐   FEE ☒

6. State Oil & Gas Lease No.

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"
(FORM C-101) FOR SUCH PROPOSALS.)

7. Lease Name or Unit Agreement Name

Eunice Monument South Unit

1. Type of Well:		
OIL WELL ☐	GAS WELL ☐	OTHER Water Injection

2. Name of Operator

Chevron USA, Inc.

8. Well No.

~~EMSU~~ # 342

3. Address of Operator

P.O. Box 670 Hobbs, New Mexico 88240

9. Pool name or Wildcat

Eunice Monument Grayburg-SA

4. Well Location

Unit Letter ___P__ : __330__ Feet From The ___South___ Line and ___330___ Feet From The ___East___ Line

Section ___09___ Township ___21S___ Range ___36E___ NMPM ___Lea___ County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

11.   **Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data**

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐		
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐		
PULL OR ALTER CASING ☐			
OTHER: _____ ☐			

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐	ALTERING CASING ☐		
COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐		
CASING TEST AND CEMENT JOB ☐			
OTHER: Casing Integrity Test ☒			

12. Describe Proposed or Completed Operations *(Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work)* SEE RULE 1103.

Bled down casing pressure - all gas. Loaded casing with 2 barrels water. Pressured
casing to 420 PSI. Held OK for 20 minutes. Tubing Pressure remained at 0 PSI.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE _____ TITLE __Field Petroleum Engineer__ DATE __12-19-90__

TYPE OR PRINT NAME   J. M. Tupman

TELEPHONE NO. 505-393-4121

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: