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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501Form C-103
Revised 10-1-73

5a. Indicate Type of Lease
State ☒ Fee ☐
5. 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.)

OIL WELL ☐	GAS WELL ☐	OTHER- INJECTOR	7. Unit Agreement Name EUNICE MONUMENT SOUTH UNIT
Name of Operator Chevron U.S.A. Inc.			8. Farm or Lease Name
Address of Operator P.O. Box 670 Hobbs, NM 88240			9. Well No. 348
Location of Well UNIT LETTER <u>N</u> <u>660</u> FEET FROM THE <u>SOUTH</u> LINE AND <u>1980</u> FEET FROM THE <u>WEST</u> LINE, SECTION <u>11</u> TOWNSHIP <u>21S</u> RANGE <u>36E</u> WMPM.			10. Field and Pool, or Wildcat EUNICE MONUMENT G/SA
15. Elevation (Show whether DF, RT, GR, etc.) 3602' GL			12. County LEA

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

ORIG. REMEDIAL WORK ☐	PLUG AND ABANDON ☐
PERMANENTLY ABANDON ☐	CHANGE PLANS ☐
OR ALTER CASING ☐	OTHER ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐	ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐	
OTHER ☐	

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.

Squeeze perforations 3621-3722 as necessary. Drill out cement. Test squeeze to 500 psi. for 30 minutes. Deepen well from 3905' to 3932'. Log well. Add additional Grayburg perforations as logs indicate. Acidize as necessary. Equip for injection. Test casing, packer and tubing to 500 psi. for 30 minutes. Return to production as an injector.

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

Signed by [Signature] TITLE Drilling Superintendent DATE OCT 27 1986

Printed Name Paul Santa TITLE Drilling Superintendent DATE OCT 27 1986

COPIES OF APPROVAL, IF ANY:

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
CHEVRON U.S.A. INC.

Address
P. O. Box 670, Hobbs, NM 88240

Reason(s) for filing (Check proper box)

☐ New Well	Change in Transporter of:	Other (Please explain)
☐ Recompletion	☒ Oil	Name Change Effective 7-1-85
☒ Change in Ownership	☐ Castinthead Gas	
	☐ Dry Gas	
	☐ Condensate	

If change of ownership give name and address of previous owner **Gulf Oil Corp., P. O. Box 670, Hobbs, NM 88240**

II. DESCRIPTION OF WELL AND LEASE

Lease Name Eunice Monument South	Well No. 348	Pool Name, including Formation Eunice Monument	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter N : 660 Feet From The South Line and 1980 Feet From The West				
Line of Section 11 Township 21S Range 36E , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)
Shell Pipeline Corp.	Box 1910, Midland TX 79701
Name of Authorized Transporter of Castinthead Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)
Phillips Petroleum	4001 Pembroke Odessa TX 79761
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	B 14 21S 36E Yes Unknown

If this production is commingled with that from any other lease or pool, give commingling order number:

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

R.D. Pite
(Signature)

Area Engineer
(Title)

5-31-85
(Date)

OIL CONSERVATION DIVISION

APPROVED **AUG - 6 1985**, 19
BY **James A. Taylor**
TITLE **DISTRICT 1 SUPERVISOR**

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allowable on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.
Separate Forms C-104 must be filed for each pool in multiply completed wells.