

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other instructions on reverse side)

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME Eunice Monument S. Unit	
2. NAME OF OPERATOR Chevron U.S.A. Inc.		8. FARM OR LEASE NAME	
3. ADDRESS OF OPERATOR P.O. Box 670, Hobbs, New Mexico 88240		9. WELL NO. 392	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface Unit H, 1980 FNL and 660 FEL		10. FIELD AND POOL, OR WILDCAT Eunice Monument G/SA	
14. PERMIT NO.		15. ELEVATIONS (Show whether OF, RT, CR, etc.) 3551	
		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) run liner, perf, acidz

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) _____
(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.)

It is proposed to run a 4" liner to shut off San Andres water production from zones 5 & 6 as follows:

MIRUPU, POOH w/ prod equip, est. circ, and cleanout hydromite plug f/3944 to 3985, run 600' of 4" 12.9#/ft K55 liner (TOL @±3400'). Cmt liner w/ 50-75sx Class C. WOC 24 hrs. TIH, clean out to TOL @ 3400', Test to 400psi, clean out inside liner to 3950', circ. clean, test liner to 400psi, run GR/CCL/CBL, have log evaluated at office prior to perforating. Perf 4" liner, 1 SPF w/180° phasing every other foot, at 3883-3886, 3900-3904 (60 holes) TIH w/ pkr at 3904, spot 100gal 15% NEFE HCL across perfs, reverse excess acid into tubing, follow spot w/500 gallons 15% NEFE HCL, dropping 12 1.1 RCNBs in first 300gallons of acid, flush to bottom perf w/CKF, swab back residue, report results to engineer, if orders to squeeze are not given, set RBP or CIBP at 3870 and perf 4" liner w/2 1/8" guns, 1 SPF, 180° phasing at 3768-3778, 3802-3820, 3824-3830, 3838-3858 (52 holes) Spot 100 gallons NEFE HCL across perfs, reverse excess acid, follow spot w/2600 gal 15% NEFE HCL dropping 78 1.1 SG RCNB's in 1st 2100 gallons, flush to bottom perf. Swab back residue, report results, recover RBP or drill out CIBP, TIH w/ production equipment.

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

SIGNED Staff Drilling Engineer TITLE Staff Drilling Engineer DATE February 4, 1988

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE 3-2-88
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

RECEIVED

MAR 3 - 1988

CCD
ADDRESS OFFICE