| Me. OF COPICS ACCEIVES   | ( _ C                             | ONSERVA                      | TION DIVISION                         |   |
|--|-----------------------------------|------------------------------|---------------------------------------|---|
| MOITUBIRTZIO   |                                   | P. O. BOX                    |                                       | Form C-103  |
| SANTA FE   | SANT                              |                              | MEXICO 87501                          | Revised 10-1-78   |
| FILE   |                                   |                              | MEXICO 87501                          |   |
| U.S.G.S.   |                                   |                              |                                       | Sa. Indicate Type of Lease  |
| LAND OFFICE  |                                   |                              |                                       | State X Fee   |
| OPERATOR   |                                   |                              | ·<br>-                                | 5. State Otl & Gas Lease No.  |
| SUNDRY  OFFICE THE SEV TOR ORD  TOTAL SEVENT SEV TOR ORD  TOTAL SEVENT S | NOTICES AND POSALS TO DRILL OR TO | REPORTS ON SEEPEN OF PLUG BA | WELLS<br>CR TO A DIFFERENT RESERVOIR. |   |
| cil OTHER- Injector  |                                   |                              |                                       | 7. Unit Agreement Name Eunice Monument South Un                     |
| Chevron U.S.A. Inc.  | ,                                 |                              |                                       | 8. Farm or Lease Name   |
| P.O. Box 670 Hobbs   | , NM 88240                        |                              | _                                     | 9. Well No.<br>384  |
| H 1980   | )<br>                             | North                        | 660                                   | 10. Field and Pool, or Wildcat Eunice Monument G/SA                 |
| East LINE, SECTION   |                                   |                              |                                       | NMPM.   |
| 15. Elevation (Show whether DF, RT, GR, etc.) 3588 GL  |                                   |                              |                                       | 12. County<br>Lea   |
| Check A  |                                   | To Indicate Na               | ature of Notice, Report of SUBSEQ     | or Other Data UENT REPORT OF:                                       |
| RM REMEDIAL WORK   |                                   | PLANS                        | CASING TEST AND CEMENT JOS OTHER      | ALTERING CASING PLUG AND ABANDONMENT  converted to injector  R-1766 |

Deepened well from 3886' to 3912'. Logged well. Deviation survey @  $3898'-6^{\circ}$ . Perforated 3698-3736 (12 holes). Acidized with 5200 gallons 15% NEFE HCL. Equiped for injection with 2 3/8'' IPC tubing and packer set @ 3637'. Tested casing and packer to 600 psi for 30 minutes (OK). Well is closed in pending completion of injection facilities. Work performed 9/10/36 - 9/14/86.

ORIGINAL SIGNED BY JERRY SEXTON

DISTRICT I SUPERVISOR

TITLE

Division Drilling Manager

ORIGINAL SIGNED BY JERRY SEXTON

DISTRICT I SUPERVISOR

TITLE

DATE

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