

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department
OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-103
Revised 1-1-88

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

API NO. (assigned by OCD on New Wells)
30-025-04662
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 2616
7. Lease Name or Unit Agreement Name EUNICE MONUMENT SOUTH UNIT
8. Well No. 362
9. Pool name or Wildcat EUNICE MONUMENT/GB/SA

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.)

1. Type of Well: OIL <input type="checkbox"/> GAS <input type="checkbox"/> WELL <input type="checkbox"/> WELL <input type="checkbox"/> OTHER INJECTOR
2. Name of Operator CHEVRON U.S.A. INC.
3. Address of Operator P.O. BOX 1150 MIDLAND, TX 79702 ATTN: WENDI KINGSTON
4. Well Location Unit Letter <u>B</u> : <u>660</u> Feet From The <u>NORTH</u> Line and <u>1980</u> Feet From The <u>EAST</u> Line Section <u>16</u> Township <u>21S</u> Range <u>36E</u> NMPM <u>LEA</u> County
10. Elevation(Show whether DF, RKB, RT, GR, etc.) 3591'

11 Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data			
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTER CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABAN. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CMT JOB <input type="checkbox"/>	
OTHER: ISOLATION POLYMER TREAT <input type="checkbox"/>		OTHER: <input checked="" type="checkbox"/>	

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.

MIRU. RUN CCL & CALIPER LOG. PUMP 50 BBLS OF FW. PUMP 1500 BBLS OF 5000 PPM
MARCIT POLYMER SOLUTION. PRESSURE TEST - OK.
RIH W/2 3/8" TBG TO 3648'.
TURN WELL OVER TO PRODUCTION 12/14/95.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
SIGNATURE	<u>Wendi Kingston</u>	TITLE	TECH. ASSISTANT
DATE:		12/20/95	
TYPE OR PRINT NAME		WENDI KINGSTON	
TELEPHONE NO.		(915)687-7826	
ORIGINAL SIGNED BY JERRY SEXTON			
APPROVED BY	DISTRICT I SUPERVISOR	TITLE	
DATE		DEC 27 1995	
CONDITIONS OF APPROVAL, IF ANY:			

BTC