

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
Federal	

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- InjectorName of Operator
Chevron U.S.A. Inc.Address of Operator
P.O. Box 670 Hobbs, NM 88240Location of Well
UNIT LETTER F 2310 FEET FROM THE North LINE AND 2310 FEET FROM
THE West LINE, SECTION 17 TOWNSHIP 21S RANGE 36E NMPM.7. Unit Agreement Name
Eunice Monument South Unit

8. Farm or Lease Name

9. Well No.
37810. Field and Pool, or Wildcat
Eunice Monument G/SA

15. Elevation (Show whether DF, RT, GR, etc.)

12. County
LeaCheck Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:FORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
OR ALTER CASING ☐PLUG AND ABANDON ☐
CHANGE PLANS ☐OTHER ☐

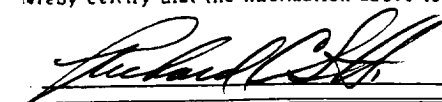
SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOBS ☐ALTERING CASING ☐
PLUG AND ABANDONMENT ☐OTHER Deepen and convert to injector ☒

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.

Deepened from 3992' to 4048'. Ran GR/CNL/CCL/Caliper logs. Acidized open hole with 4000 gallons 15% NEFE HCL. Equiped for injection with 2 3/8" IPC tubing and packer set @ 3761'. Tested casing and packer to 600 psi for 30 minutes (OK). Well is shut-in pending completion of injection facilities. Work performed 10/2/86 - 10/11/86.

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



TITLE Division Drilling Manager

DATE 10-16-1986

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT 1 SUPERVISOR

ED BY

TITLE

DATE

OCT 20 1986

SIGNATURES OF APPROVAL, IF ANY: