

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT  
NEW Oil Cons. Division  
1625 N. French Dr.  
Hobbs, NM 88240

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.

Use "APPLICATION FOR PERMIT --" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well: <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	5. Lease Designation and Serial No. LC-031740-A
2. Name of Operator CHEVRON USA INC	6. If Indian, Allottee or Tribe Name N/A
3. Address and Telephone No. 15 SMITH ROAD, MIDLAND, TX 79705 915-687-737	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Unit Letter N : 660' Feet From The SOUTH Line and 1980' Feet From The WEST Line Section 17 Township 21-S Range 36-E	8. Well Name and Number EUNICE MONUMENT SOUTH UNIT 418
	9. API Well No. 30-025-04691
	10. Field and Pool, Exploratory Area EUNICE MONUMENT GRAYBURG SA
	11. County or Parish, State LEA, NM

12. Check Appropriate Box(s) To Indicate Nature of Notice, Report, or Other Data

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> OTHER: REQUEST FOR TA STATUS
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log Form.)

13. 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.)

1-16-03: RAN MIT. (ORIGINAL CHART & COPY OF CHART ATTACHED)

TA STATUS HAD EXPIRED ON 11-15-02.

CIBP IS SET @ 3760'.

WELL IS UNECONOMICAL TO PRODUCE.

TEMPORARILY ABANDONED.

TA Approved For 12 Month Period  
Ending 1/16/04

FILED  
HOBBS  
NM

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

SIGNATURE Denise Leake TITLE Regulatory Specialist DATE 1/24/2003  
TYPE OR PRINT NAME Denise Leake

(This space for Federal or State office use)

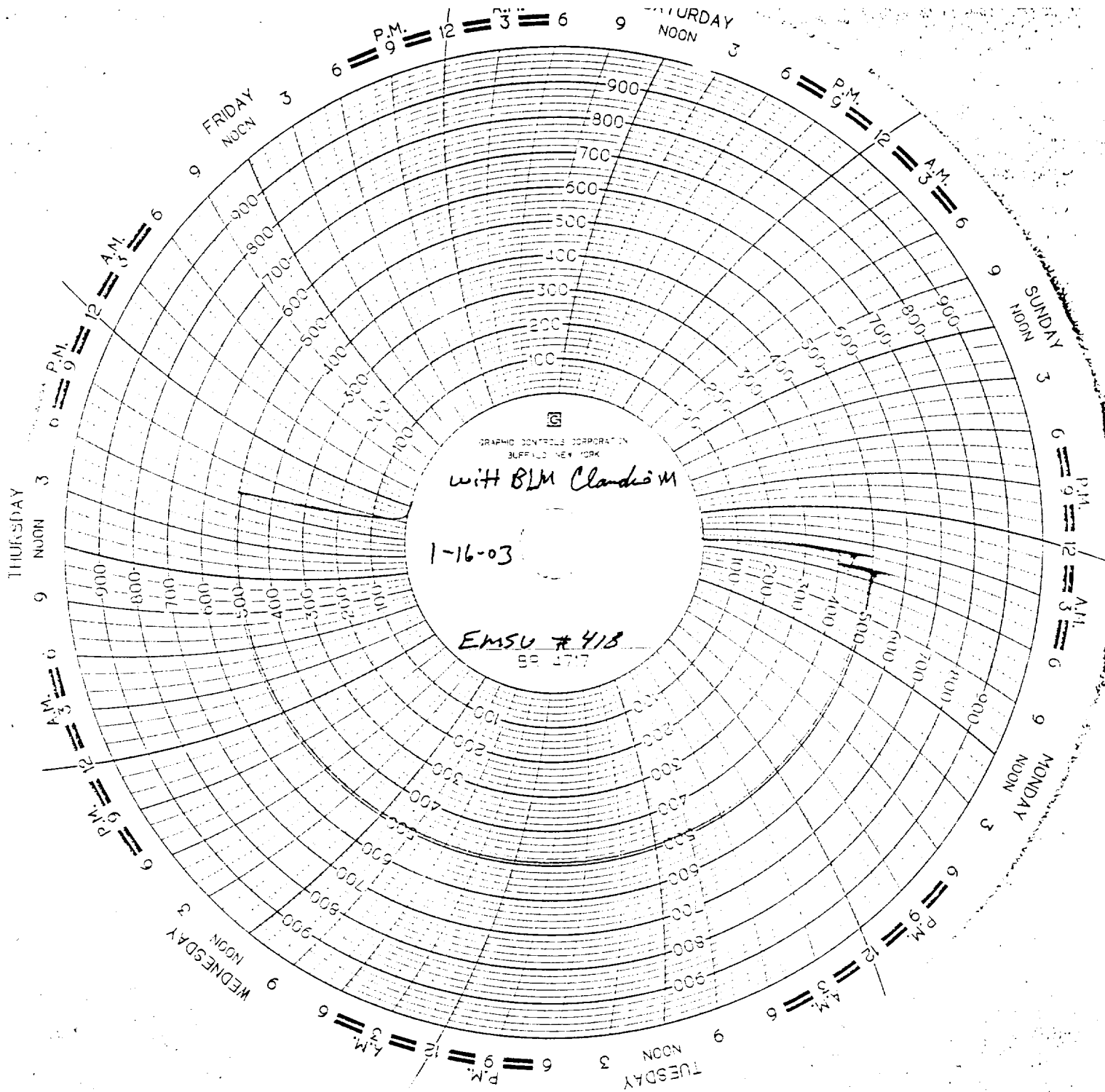
APPROVED (ORIG. SGD.) JOE G. LARA  
CONDITIONS OF APPROVAL, IF ANY: TITLE

Signature of Approver

DATE 3/10/03

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

GWW



RECEIVED  
HOURS  
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