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**OIL CONSERVATION DIVISION**  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

|                                                        |                              |
|--------------------------------------------------------|------------------------------|
| 5a. Indicate Type of Lease                             |                              |
| State <input checked="" type="checkbox"/> <u>Fixed</u> | Fee <input type="checkbox"/> |
| 5. State Oil & Gas Lease No.                           |                              |

**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.)

|                                                                               |
|-------------------------------------------------------------------------------|
| <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <u>W110</u> |
| Operator<br>Chevron U.S.A. Inc.                                               |
| Address of Operator<br>P. O. Box 670, Hobbs, NM 88240                         |
| Location of Well<br>T. 17N, R. 66E, S. 17, T. 21S, R. 36E, N.M.P.M.           |

|                                                        |
|--------------------------------------------------------|
| 7. Unit Agreement Name<br>Eunice Monument South Unit   |
| 8. Farm or Lease Name<br>Eunice Monument South Unit    |
| 9. Well No.<br>448                                     |
| 10. Field and Pool, or Wildcat<br>Eunice Monument G-SA |
| 12. County<br>Lea                                      |

**Check Appropriate Box To Indicate Nature of Notice, Report or Other Data**

**NOTICE OF INTENTION TO:**

**SUBSEQUENT REPORT OF:**

|                                            |                                           |                                                      |                                                                                   |
|--------------------------------------------|-------------------------------------------|------------------------------------------------------|-----------------------------------------------------------------------------------|
| <input type="checkbox"/> REMEDIAL WORK     | <input type="checkbox"/> PLUG AND ABANDON | <input type="checkbox"/> REMEDIAL WORK               | <input type="checkbox"/> ALTERING CASING                                          |
| <input type="checkbox"/> PARTIALLY ABANDON | <input type="checkbox"/> CHANGE PLANS     | <input type="checkbox"/> COMMENCE DRILLING OPER.     | <input type="checkbox"/> PLUG AND ABANDONMENT                                     |
| <input type="checkbox"/> ALTER CASING      | <input type="checkbox"/>                  | <input type="checkbox"/> CASING TEST AND CEMENT JOBS | <input checked="" type="checkbox"/> OTHER <u>inspected for csg risers to surf</u> |

Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed operations.) SEE RULE 1103.

Risers have been inspected by OCD personnel.

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

|                                 |                                    |                        |
|---------------------------------|------------------------------------|------------------------|
| <u>Jerry Sexton</u>             | TITLE <u>New Mexico Area Supt.</u> | DATE <u>2-27-87</u>    |
| ORIGINAL SIGNED BY JERRY SEXTON |                                    |                        |
| BY <u>Jerry Sexton</u>          | TITLE <u>DISTRICT SUPERVISOR</u>   | DATE <u>MAR 9 1987</u> |
| OTHER APPROVALS, IF ANY:        |                                    |                        |

RECEIVED  
MAR 3 1987  
OCD  
HOURS OFFICE