

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501Form C-103
Revised 10-1-78

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5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> 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.)

OIL WELL <input type="checkbox"/>	GAS WELL <input type="checkbox"/>	OTHER- <input type="checkbox"/>	Injector	7. Unit Agreement Name Eunice Monument South
Name of Operator Chevron U.S.A. Inc.				8. Farm or Lease Name Unit
Address of Operator P.O. Box 670 Hobbs, NM 88240				9. Well No. 368
Location of Well UNIT LETTER <u>D</u> <u>660</u> FEET FROM THE <u>North</u> LINE AND <u>660</u> FEET FROM THE <u>West</u> LINE, SECTION <u>17</u> TOWNSHIP <u>21S</u> RANGE <u>36E</u> NMPM.				10. Field and Pool, or WH/Leat Eunice Monument GB/SA
15. Elevation (Show whether DF, RT, GR, etc.) 3629				12. County Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:ORM REMEDIAL WORK ☐
FORABLY ABANDON ☐
OR ALTER CASING ☐PLUG AND ABANDON ☐
CHANGE PLANS ☐THEN run liner, perf, acdz ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOBS ☐
OTHER ☐ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

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.

It is proposed to run 4½" liner . (TOL± 3515). Perf. liner at 3770-3780, 3798-3802, 3826-3838, 3844-3856, 3865-3874, 3890-3902, 3914-3926, 3973-3994, 4014-4030, 4040-4046, 114 holes, Acdz w/ 5800 gal NEFE. Swab back and return to injection.

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

SIGNED BY M. E. Abner TITLE Staff Drilling Engr. DATE August 5, 1988ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

SIGNED BY _____

TITLE _____

DATE AUG 09 88

CONDITIONS OF APPROVAL, IF ANY: