

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 1-1-89

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) <b>30-025-04698</b>	
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No. <b>2616</b>	
7. Lease Name or Unit Agreement Name <b>EUNICE MONUMENT SOUTH UNIT</b>	
8. Well No. <b>379</b>	
8. Pool name or Wildcat <b>EUNICE MONUMENT/GB/SA</b>	

**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 WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	
2. Name of Operator <b>CHEVRON U.S.A. INC.</b>	
3. Address of Operator <b>P.O. BOX 1150 MIDLAND, TX 79702 ATTN: WENDI KINGSTON</b>	
4. Well Location Unit Letter <b>G F</b> : <b>2310</b> Feet From The <b>NORTH</b> Line and <b>2310</b> Feet From The <b>EAST</b> Line Section <b>17</b> Township <b>21S</b> Range <b>36E</b> NMPM <b>LEA</b> County	
10. Elevation(Show whether DF, RKB, RT, GR, etc.) <b>3629'</b>	

11 Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
<b>NOTICE OF INTENTION TO:</b>	<b>SUBSEQUENT REPORT OF:</b>
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CMT JOB <input type="checkbox"/>
OTHER: <b>ISOLATION POLYMER TREAT</b> <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. PERF F/3792'-3931'. SPOT 100 GALS 15% NFEFA ACROSS PERFS.  
FILL OH W/SD, CAP W/CACO3 FLOUR. PUMP 50 BBLS FW. PUMP 1500 BBLS OF  
5000 PPM AMRCIT. SPOT 100 GALS 15% NEFEA.  
RIH W/2 7/8" TBG TO 3920'.  
TURN WELL OVER TO PRODUCTION 11/27/95.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
SIGNATURE <b>Wendi Kingston</b>	TITLE <b>TECH. ASSISTANT</b>
DATE: <b>12/13/95</b>	
TYPE OR PRINT NAME <b>WENDI KINGSTON</b>	TELEPHONE NO. <b>(915)687-7826</b>
APPROVED BY <b>JERRY SEXTON</b>	
TITLE <b>DISTRICT I SUPERVISOR</b>	
DATE <b>DEC 18 1995</b>	
CONDITIONS OF APPROVAL, IF ANY:	