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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 type="checkbox"/> | Fee <input checked="" 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"/> OIL<br><input type="checkbox"/> GAS WELL<br><input type="checkbox"/> OTHER- <b>Injector</b>                                                                                    | 7. Unit Agreement Name<br><b>Eunice Monument South Unit</b>   |
| 6a. Name of Operator<br><b>Chevron U.S.A. Inc.</b>                                                                                                                                                      | 8. Form or Lease Name                                         |
| 6b. Address of Operator<br><b>P.O. Box 670 Hobbs, NM 88240</b>                                                                                                                                          | 9. Well No.<br><b>366</b>                                     |
| 6c. Location of Well<br>SECTION <b>B</b> TOWNSHIP <b>660</b> RANGE <b>North</b> LINE AND <b>1980</b> FEET FROM<br>SECTION <b>East</b> TOWNSHIP <b>17</b> RANGE <b>21S</b> LINE AND <b>36E</b> FEET FROM | 10. Field and Pool, or Wildcat<br><b>Eunice Monument G/SA</b> |
| 11. Elevation (Show whether DF, RT, GR, etc.)<br><b>3613' GL</b>                                                                                                                                        | 12. County<br><b>Lea</b>                                      |

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

**NOTICE OF INTENTION TO:**

**SUBSEQUENT REPORT OF:**

|                                                                                                                                                                 |                                                                                                                      |                                                                                                                                                                                                                                 |                                                                                                                                        |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> REMEDIAL WORK<br><input type="checkbox"/> PARTIALLY ABANDON<br><input type="checkbox"/> ALTER CASING<br><input type="checkbox"/> OTHER | <input type="checkbox"/> PLUG AND ABANDON<br><input type="checkbox"/> CHANGE PLANS<br><input type="checkbox"/> OTHER | <input type="checkbox"/> REMEDIAL WORK<br><input type="checkbox"/> COMMENCE DRILLING OPERATIONS<br><input type="checkbox"/> CASING TEST AND CEMENT JOBS<br><input type="checkbox"/> OTHER <b>Deepen and convert to injector</b> | <input type="checkbox"/> ALTERING CASING<br><input type="checkbox"/> PLUG AND ABANDONMENT<br><input checked="" type="checkbox"/> OTHER |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|

**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.**

Removed 5" liner. Deepened from 3935' to 4053'. Ran GR/CNL logs. Ran 97 joints 4.5" 10.5# K-55 ST&C casing set @ 4053' with DV tool @ 2822'. Cemented first stage with 125 sacks class "C" 1.5% D127 2% CACL2 .25#/sack D79. Cemented second stage with 200 sacks class "C" 16% Gel 2% Salt and 250 sacks class "C" Neat. Plug down 8:30 AM 11/8/86. Circulated 75 sacks to surface. WOC 24 hours. Drilled out cement and float equipment. Tested casing to 500 psi for 30 minutes. Perforated 3802' - 4040' (76 holes). Acidized with 4700 gallons 15% NEFE HCL. Equipped for injection. Tested casing and packer to 600 psi for 30 minutes (OK). Work performed 11/2/86 - 11/12/86.

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

|                                                 |                                      |                        |
|-------------------------------------------------|--------------------------------------|------------------------|
| Signed by<br><br><b>Paul Kautz</b><br>Geologist | TITLE <b>Drilling Superintendent</b> | DATE <b>11-19-1986</b> |
| BY _____<br>TITLE _____                         | DATE <b>NOV 21 1986</b>              |                        |

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