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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"/> | 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 OPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.

|                                                                                                                                                                                                                   |  |                                |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------|
| <input checked="" type="checkbox"/> ALL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-                                                                                                         |  | 7. Unit Agreement Name         |
| Name of Operator<br>Chevron U.S.A. Inc.                                                                                                                                                                           |  | Eunice Monument South Unit     |
| Address of Operator<br>P. O. Box 670, Hobbs, NM 88240                                                                                                                                                             |  | 8. Farm or Lease Name          |
|                                                                                                                                                                                                                   |  | Eunice Monument South Unit     |
| Location of Well<br>Section of Well<br>Section Letter <u>A</u> <u>660</u> FEET FROM THE <u>North</u> LINE AND <u>660</u> FEET FROM <u>East</u> LINE, SECTION <u>21</u> TOWNSHIP <u>21S</u> RANGE <u>36E</u> NMPM. |  | 9. Well No. <u>437</u>         |
|                                                                                                                                                                                                                   |  | 10. Field and Pool, or Whitcat |
|                                                                                                                                                                                                                   |  | Eunice Monument G-SA           |
| 15. Elevation (Show whether DF, RT, GR, etc.)                                                                                                                                                                     |  | 12. County                     |
|                                                                                                                                                                                                                   |  | 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<br><input type="checkbox"/> PARTIALLY ABANDON<br><input type="checkbox"/> ALTER CASING | <input type="checkbox"/> PLUG AND ABANDON<br><input type="checkbox"/> CHANGE PLANS<br><input type="checkbox"/> | <input type="checkbox"/> REMEDIAL WORK<br><input type="checkbox"/> COMMENCE DRILLING OPS.<br><input type="checkbox"/> CASING TEST AND CEMENT JOBS<br><input checked="" type="checkbox"/> OTHER <u>inspected for csg risers to surf</u> | <input type="checkbox"/> ALTERING CASING<br><input type="checkbox"/> PLUG AND ABANDONMENT<br><input checked="" type="checkbox"/> |

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.

L. M. M. M. TITLE New Mexico Area Supt. DATE 2-27-87

ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT SUPERVISOR  
DATE MAR 9 1987