

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)	
30-025-04749	
5. Indicate Type of Lease	
STATE	<input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	
N/A	
7. Lease Name or Unit Agreement Name	
EUNICE MONUMENT SOUTH UNIT	
8. Well No.	
444	
9. Pool name or Wildcat	
EUNICE MONUMENT/GB SA	

**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	
CHEVRON U.S.A. INC.	
3. Address of Operator	
P.O. BOX 1150 MIDLAND, TX 79702 ATTN: P.R. MATTHEWS	
4. Well Location	
Unit Letter	H
Section	21
Feet From The	NORTH
Township	21S
Line and	Range
36E	660
Feet From The	EAST
NMPM	LEA
County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	
3608 GE	

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

**NOTICE OF INTENTION TO:**

PERFORM REMEDIAL WORK	<input type="checkbox"/>	PLUG AND ABANDON	<input type="checkbox"/>
TEMPORARILY ABANDON	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>		
OTHER:	<input type="checkbox"/>		

**SUBSEQUENT REPORT OF:**

REMEDIAL WORK	<input type="checkbox"/>	ALTER CASING	<input type="checkbox"/>
COMMENCE DRILLING OPNS.	<input type="checkbox"/>	PLUG AND ABAN.	<input type="checkbox"/>
CASING TEST AND CMT JOB	<input type="checkbox"/>		
OTHER: POLYMER SQUEEZE	<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, POOH WITH INJECTION TBG.  
SET PACKER AT 3720' AND SQUEEZE OH FROM 3819'-3840' W/POLYMER.  
WAIT ON SQUEEZE FOR 48 HOURS.  
TIH RELEASE PACKER AND CLEAN HOLE TO 4004'.  
TIH W/INJ. TBG. & PKR, SET AT 3751' AND TEST TO 600 PSI-OK.  
RDMO AND RETURN TO INJECTION.

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

SIGNATURE	<u>P.R. Matthews</u>	TITLE	<u>TECH. ASSISTANT</u>	DATE:	<u>12-18-91</u>
TYPE OR PRINT NAME	<u>P.R. MATTHEWS</u>	TELEPHONE NO.	<u>(915)687-7812</u>		
APPROVED BY		TITLE	<u>DATE</u>		
CONDITIONS OF APPROVAL, IF ANY:					