Submit 3 Copies

to Appropriate

State of New Mexico

Form C-103

nerg	y, Minerals	and Natu	ıral Res	sources	Department
)IL	CONSE	RVAT	ION	DIVIS	SION

	Oli Ookosa ka Hatulai nesources Dep.		Revisied 1-1-89
District Office	OIL CONSERVATION DIVISIO	N	
	P.O. Box 2088		
DISTRICT I	Santa Fe, New Mexico 87504	-2088	
P.O. Box 1980, Hobbs, NM 88240			
DISTRICT II		API NO. (assig	ned by OCD on New Wells)
P.O. Drawer Dd, Artesia, NM 88210	•	30-025-0	8708
DISTRICT III 1000 Rio Brazos Rd., Aztec, Nm 87410		5. Indicate To	ype of Lease
1000 NIO BIZZOS NO., AZEBC, NIM 874 IU			STATE X FEE
		6. State Oil	& Gas Lease No.
		E-230	
SUNDRY N	NOTICES AND REPORTS ON WELLS		
(DO NOT USE THIS FORM FOR	PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BA	CK TO A 7. Lease Nam	e or Unit Agreement Name
	ESERVOIR. USE "APPLICATION FOR PERMIT"	EUNICE N	ONUMENT SOUTH UNIT
	2-101) FOR SUCH PROPOSALS.)		
1. Type of Well: OIL GAS			
	T OTHER INJECTOR		
	OTHER INJECTOR		
2. Name of Operator		8. Well No.	
CHEVRON U.S.A. INC.			307
P.O. BOX 1150 MIDLAND, TX 797	02 ATTN: WENDI KINGSTON	9. Pool name	
4. Well Location	DZ ATTN: WENDI KINGSTON	EUNICE IV	IONUMENT/GB/SA
Unit Letter F :	1980 Feet From The NORTH	Line and 19	80 Feet From The WEST Line
Section 11	Township 21S	Range 36E	NMPM LEA County
	10. Elevation(Show whether DF, RKB, RT,		
	3572'		
11 Check App	propriate Box to Indecate Nature of Notice, Report, or	Other Data	
NOTICE OF INTENTION 1	ro: Subse	QUENT REPORT OF:	
PERFORM REMEDIAL WORK PLUG AND	ABANDON REMEDIAL WORK		ALTER CASING
TEMPORARILY ABANDON CHANGE PI	LANS COMMENCE DRILLING OP	vs.	PLUG AND ABAN.
PULL OR ALTER CASING	CASING TEST AND CMT J	OB -	
OTHER: CLEAN OUT/STIM	OTHER:		[₩]
	— Unen:		X
12. Describe Proposed or Completed Operations/Class	rly state all pertinent details, and give pertinent dates, including		
esticated date of starting any proposed work) SEE	RULE 1103.		
WORK STARTED 10/1	12/94: RU SLICKLINE UNIT. TAG FILL AT	TD.	
	5 15% NEFEA/UNISOL.	10.	
TURN WELL OVER TO			
TOTAL VALLE OVER TO	FNOD 10/12/34.		

	1 100 2		
I hereby certify that the SIGNITURE	the state of the samples to the best of my knowledge and belief. TECH. ASSISTANT	DATE: 11/29/94	
TYPE OR PRINT NAME	WENDI KINGSTON	TELEPHONE NO. (915)687-7826	
	A SEXTON		=
APPROVED BY	nne	DATE	
CONDITIONS OF APPROV	/AL, IF ANY:	- 1 1534	

Submit 3 Copies to Appropriate

State of New Mexico

Form C-103

		State of IV	Kelvi Ma	(ICO	
Energy,	Minerals	and Natur	al Reso	urces De	partment
011 C	ONCE	DVAT	OND	11/1/10/1	OBL

District Office	1	OII	L CONSERVA	ATION DIVISION		,	
			P.O. I	Box 2088			
DISTRICT I			Santa Fe, No	ew Mexico 87504-208	8		
	0, Hobbs, NM 88240				_		
P.O. Drawer D	! Dd, Artesia, NM 88210	0				NO. (assigned by OCD on New Welle) -025-08708	
DISTRICT III		•			 	Indicate Type of Lease	
1000 Rio Braz	zoe Rd., Aztec, Nm 87	410				STATE X	FEE
						State Oil & Gas Lease No.	
ſ		SUNDRY NOTIC	EC AND DEDOD	C ON WELL C	E-2	230	
	IDO NOT USE T			TO DEEPEN OR PLUG BACK TO			Mantella (1991)
	(DO NOT OSE 1	DIFFERENT RESERVE				Lease Name or Unit Agreement Name NICE MONUMENT SOUT	H UNIT
		(FORM C-101) F	FOR SUCH PROPOSA	LS.)			
1. Type of V	Well:						
WELL		GAS WELL	OTHER INJEC	TOR.			
2. Name of C	Operator		OTHER MOL			Well No.	
	CHEVRON U	.S.A. INC.			"	307	
3. Address of						Pool name or Wildcet	
P.U. BUX		ND, TX 79702 A	TTN: NITA RICE		EU	NICE MONUMENT/GB/SA	\
Unit Letter		F :	1980 Feet From Th	NORTH Lin	ne and	1980 Feet From The	WEST Line
Section	11		Township		nge 36	E NMPM LEA	County
			10. Elevatio	niShow whether DF, RKB, RT, GR, etc 35721	c.)		
							And the state of t
11			e Box to Indecate Na	ture of Notice, Report, or Other	Data	<u> </u>	
		NTENTION TO:		SUBSEQUE		T OF:	_
PERFORM REN	MEDIAL WORK	NTENTION TO: PLUG AND ABAND		SUBSEQUEN		T OF:	
PERFORM REN	MEDIAL WORK Y ABANDON	NTENTION TO:		SUBSEQUENT REMEDIAL WORK COMMENCE DRILLING OPNS.			
PERFORM REN TEMPORARILY PULL OR ALTE	MEDIAL WORK Y ABANDON ER CASING	NTENTION TO: PLUG AND ABAND CHANGE PLANS	ON	SUBSEQUEN		ALTER CASING	
PERFORM REN	MEDIAL WORK Y ABANDON	NTENTION TO: PLUG AND ABAND CHANGE PLANS		SUBSEQUENT REMEDIAL WORK COMMENCE DRILLING OPNS.		ALTER CASING	
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PERFORM REM TEMPORARILY PULL OR ALTE OTHER:	Proposed or Complete date of starting any pro	PLUG AND ABAND CHANGE PLANS STIM dd Operations/Clearly state opposed work) SEE RULE 11 OSE TO: RU SLIC I CLEAN OUT WIT ELL OVER TO PRO	all pertinent details, and 103. CKLINE UNIT. TATH COILED TBG.	SUBSEQUENT REMEDIAL WORK COMMENCE DRILLING OPNS. CASING TEST AND CMT JOB OTHER: Give pertinent dates, including G FILL AT TD. IF FILL IS	ABOVE 5% NEFEA	ALTER CASING PLUG AND ABAN. A/UNISOL.	

4					
I hereby certify that the information		wiedge and belief.			
SIGNITURE / //	TITLE TITLE	TECH. ASSISTANT	DATE:	08/31/94	
TYPE OR PRINT NAME	WEND! KINGSTON		TELEPHONE NO.	(915)687-7826	
	ED BY JERRY SEKTON			SEP 02 1994	
APPROVED BY	I SUPERVISOR TITLE		DATE	OEL AN DOL	
CONDITIONS OF APPROVAL, IF AN	NY:			· · · · · · · · · · · · · · · · · · ·	

CONDITIONS OF APPROVAL, IF ANY:

rorm	c.	10	3
Revis	ed :	1-1	-89

- DATE -

DISTRICT I P.O. Box 1980, Hobbs, NM 88240 DISTRICT II	OIL CONSERVA	x 2088	WELL API NO.
P.O. Drawer DD, Artesia, NM 88210	Santa Fe, New Me	xico 87504-2088	5. Indicate Type of Lease
DISTRICT III			STATE X FEE
1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease No.
DIFFERENT RESER	CES AND REPORTS ON POSALS TO DRILL OR TO DES VOIR. USE "APPLICATION FO 101) FOR SUCH PROPOSALS.	EPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name
1. Type of Well:			
2. Name of Operator	OTHER - W]	[W	Eunice Monument South Unit
Chevron U.S.A.	, Inc.		8. Well No. 307
3. Address of Operator P.O. Box 670,	Hobbs, New Mexico	88240	9. Pool name or Wildcat Eunice Monument Grayburg S/A
4. Well Location			
Unit Letter F: 1980	Feet From The North	Line and1980	Feet From The West Line
Section 11	01.5	267	
	10	Range 36E 1 ether DF, RKB, RT, GR, etc.)	NMPM Lea County
	////		
11. Check A	ppropriate Box to Indica	ate Nature of Notice, Re	eport, or Other Data
NOTICE OF INTE	ENTION TO:		SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERIAL CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	ALTERING CASING
PULL OR ALTER CASING		CASING TEST AND CE	
OTHER:	Г	¬	
12 Describe Describer Control of		OTHER: Cellar In	
 Describe Proposed or Completed Operatio work) SEE RULE 1103. 	ns (Clearly state all pertinent detail	ls, and give pertinent dates, includi	ing estimated date of starting any proposed
Dug up cellar and repipe	ed the casing valve	to surface.	
Inspected by OCD represe	entative 1-5-89		
The second section is a second	meative i j-oj.		
Thereby certify the the information of	#		
I hereby certify that the information above is true and	d complete to the best of my knowledge		
SIGNATURE		mr NM Area Prod.	Supt. DATE 1-30-89
TYPEOR PRINT NAME C. L. Morri	11		ТЕГЕРНОНЕ NO. 505-393-4121
(This space for State Use)	10		
APPROVED BY R ava	lle	OIL & GAS IN	SPECTOR FEB 0 2 1989

RECEIVED

FEB 1 1980 OCD HOBBS OFFICE