

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>		7. Unit Agreement Name Eunice Monument South Unit
2. Name of Operator Chevron U.S.A. Inc.		8. Farm or Lease Name
3. Address of Operator P.O. Box 670 Hobbs, NM 88240		9. Well No. 421
4. Location of Well UNIT LETTER M 660 FEET FROM THE South LINE AND 660 FEET FROM THE West LINE, SECTION 16 TOWNSHIP 21S RANGE 36E NMPM.		10. Field and Pool, or Wildcat Eunice Monument G/SA
15. Elevation (Show whether DF, RT, GR, etc.) 3640' GL		12. County Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPS. ☐
CASING TEST AND CEMENT JOBS ☐
OTHER Deepen, Add Perfs, Acidize ☒
ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

17. 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.

Deepened from 3941' to 4023'. Added perforations 3839 - 3825 (8 holes). Acidized with 5000 gallons 15% NEFE HCL. Returned to production. Work performed 3/13/87 - 3/17/87.

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

SIGNED <u>M. E. Atkins</u>	TITLE <u>Staff Drilling Engineer</u>	DATE <u>4-1-1987</u>
ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR		
APPROVED BY _____	TITLE _____	DATE <u>APR 3 1987</u>
CONDITIONS OF APPROVAL, IF ANY:		

RECEIVED
APR 2 1987
OCCD
HOBBS OFFICE