Submit 3 Copies to Appropriate

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

District Office		_			107
DISTRICT I P.O. Box 1980, Hobbs NM 88241-1980	OIL CONSERVATION		WELL API NO.		
P.O. Box 1980, Hoods NM 88241-1980 P.O. Box 2088 DISTRICT II Santa Fe, New Mexico 87504-2088			30-025-21894		
P.O. Drawer DD, Artesia, NM 88210			5. Indicate Type	of Lease STATE X	FEE 🗌
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410	·		6. State Oil & G		PEE
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.)			7. Lease Name or Unit Agreement Name		
1. Type of Well: OIL GAS WELL WELL	other INJ	EUNICE MONUMENT SOUTH UNIT			
2. Name of Operator		8. Well No.			
Chevron U.S.A. Inc. 3. Address of Operator			424 9. Pool name or Wildcat		
P.O. Box 1150, Midland, TX 79702			EUNICE MONUMENT; GRAYBURG-SAN ANDRES		
4. Well Location Unit Letter P : 760	Feet From The SOUTH	Line and 66	50 Feet Fro	om The EAST	Line
Section 16	Township 21S R	ange 36E	NMPM	LEA	County
	10. Elevation (Show wheth				
Charle Asses	////A	Notara of Notice	Domand on		
	ropriate Box to Indicate	1	-		- _
NOTICE OF INTENTION TO: SUB				T REPORT OF	•:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	X	ALTERING CASING	
EMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING			OPNS.	PLUG AND ABANDO	NMENT
L OR ALTER CASING CASING TEST AND CE			MENT JOB		
ATUED.		OTHER:			Γ-
OTHER:		<u> </u>			
 Describe Proposed or Completed Operation work) SEE RULE 1103. 	ions (Clearly state all pertinent de	tails, and give pertinent da	tes, including estin	nated date of starting an	ny proposed
SPLIT. ISOLATED CSG CSGTAGGED SAND @ 3885	PED 1 SACK CMT W/3/4 SACK LEAK 52'-64'. DUMPED 2 5', TAGGED CMT @ 3938'. 4'. RETURNED WELL TO INJ 27 - 7/30/97	SX SAND ON RBP @ 3 DRILLED SAND AND C	3705'. REPLA		
I hereby certify that the information above is true	and complete to the best of my knowledg				
SIGNATURE J. N. MOLL	TIT	TECHNICAL ASS	SISTANT	DATE10/	/1/97
TYPE OR PRINT NAME J. K. RIPLEY	/			TELEPHONE NO. (915)	687-7148
(This space for State Use) OFFICE A. SECTION BY COMMON APPROVED BY	LHVISOR	rle	· . =	F8 13 1	
CONDITIONS OF APPROVAL, IF ANY:				_	