

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease
State ☒ Fee ☐

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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Injector	7. Unit Agreement Name Eunice Monument South Un
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. 442
4. Location of Well UNIT LETTER F, 2080 FEET FROM THE West LINE AND 2080 FEET FROM THE North LINE, SECTION 21 TOWNSHIP 21S RANGE 36E NMPM.	10. Field and Pool, or Wildcat Eunice Monument G/SA
15. Elevation (Show whether DF, RT, GR, etc.) 3600.3' GL	12. County Lea

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"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/> Convert to injector

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.

Perforated 3820' - 3863' (12 holes). Acidized with 1000 gallons 15% NEFE HCL. Equipped for injection with 2 3/8" IPC tubing and packer set @ 3771'. Tested casing and packer to 600 psi for 30 minutes (OK). Work performed 2/2/87 - 2/4/87.

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

SIGNED M. E. Chinn TITLE Staff Drilling Engineer DATE 2-11-1987

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

PROVED BY _____ TITLE _____ DATE FEB 13 1987

CONDITIONS OF APPROVAL, IF ANY: