

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

Form C-103  
Revised 10-1-78

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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 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 670, Hobbs, New Mexico 4. Location of Well UNIT LETTER <u>G</u> <u>2254</u> FEET FROM THE <u>North</u> LINE AND <u>2080</u> FEET FROM THE <u>East</u> LINE, SECTION <u>6</u> TOWNSHIP <u>21S</u> RANGE <u>36E</u> N.M.P.M. 15. Elevation (Show whether DF, RT, GR, etc.) 3557.8 GL	7. Unit Agreement Name Eunice Monument South Unit 8. Farm or Lease Name 9. Well No. 194 10. Field and Pool, or Wildcat Eunice Monument G-SA 12. County Lea
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10. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

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 OPERATIONS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <u>Completion report</u> <input checked="" type="checkbox"/>

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 1703.

MIRU PU. Circulated the hole clean. TIH with 4" gun with 2-1/2 JHPF and perforated from 3891' - 4020'. TIH with packer to 4020' and test tubing to 3000 psi. Acidized perfs with 4500 gals 15% NEFE HCL. Equipped well to pump. Performed a chemical squeeze. Started production.

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

SIGNED MW Casey TITLE Division Proration Engineer DATE 5/13/86

ORIGINAL SIGNED BY JERRY SEXTON  
APPROVED BY DISTRICT 1 SUPERVISOR TITLE  DATE JUN 18 1986

CONDITIONS OF APPROVAL, IF ANY: