Submit 3 copies	State of New Mexico					,	Fa 0 400	
Submit 3 copies to Appropriate District Office		Energy, Minerals and	Natural R	esources Department			Form C-103 Revised 1-1-8	
DISTRICT!	•	IL CONSED	VATI	ON DIVICION				
P.O. Box 1980, Hobos, NM 88240 OIL CONSERVATION DIVISION					WELL API NO.			
DISTRICT II P.O. Box 2088					30-025-29601			
P.O. Box Drawer DD, Artesia, NM 88210 Santa Fe, New Mexico 87504-2088					5. Indicate T	ype of Lease STATE .▼	~	
<u>DISTRICT III</u>								
1000 Rio Brazos Rd., Aztec, I					6. 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 DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMI								
						7. Lease Name or Unit Agreement Name		
		01) FOR SUCH PROP			EUNICE M	ONUMENT SOUTH UN	iT .	
1. Type of Well: OIL GAS — WELL WELL OTHER INJECTOR								
Name of Operator CHEVRON USA INC					8. Well No.	8. Well No. 338		
Address of Operator 15 SMITH ROAD, MIDLAND, TX 79705						9. Pool Name or Wildcat EUMONT MONUMENT GB/SA		
Well Location								
Unit Letter	<u>P</u> :5	50' Feet From Th	e SOUT	TH Line and 560'	Feet From	The EAST Lin	е	
Section8	T	ownship 21-S	R	Range36-E N	IMPM	LEA_COU	NTY	
_	1	Elevation (Show whether	er DF, RKB,	RT,GR, etc.) 3611'				
11.	Check Appr	opriate Box to India	cate Nat	ure of Notice, Repor	t, or Other [Data		
NOTICE OF WITHOUT ON THE					JBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK	PLI	JG AND ABANDON	_	REMEDIAL WORK	₹	ALTERING CASING		
TEMPORARILY ABANDON		ANGE PLANS	_	COMMENCE DRILLING OF	PERATION	PLUG AND ABANDON	JENT -	
PULL OR ALTER CASING CASING TEST AND CEMEI								
OTHER:						ST TA STATUS	_	
12. Describe Proposed or Cor proposed work) SEE RUL	npleted Operati E 1103.	ons (Clearly state all p	ertinent de	etails, and give pertinent	dates, including	g estimated date of star	ting any	
10-03-02: MIRU. 10-04-02: REL PKR. TIH W// 10-07-02: LOAD CSG & PRE	CIBP & SET @ ESSURE TO 64	3722'. TEST CIBP & 0 0#. RUN MIT FOR 30 I	CSG TO 60 MINS - (O	00 PSI. RIGINAL CHART & COP	Y OF CHART	ATTACHED)		
WELL IS TEMPORARILY AB						,		

TITLE Regulatory Specialist DATE 10/18/2002 Telephone No. 915-687-7375 TYPE OR PRINT NAME

This Approval of Temporary

Abandonment Expires

Denise Leake

(This space for State Use)

APPROVED

CONDITIONS OF APPROVAL, IF ANY:

TITLE

() - 30 - 40

DATE

