

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-

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 <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. 345
4. Location of Well UNIT LETTER 0 760 FEET FROM THE South LINE AND 1880 FEET FROM THE East LINE, SECTION 10 TOWNSHIP 21S RANGE 36E NMPM.	10. Field and Pool, or Wildcat Eunice Monument G/SA
15. Elevation (Show whether DF, RT, GR, etc.) 3567.4' GL	12. County Lea

16.

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 OPNS. ☐
CASING TEST AND CEMENT JOB ☒
OTHER ☐

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 propos. work) SEE RULE 1703.

3-22-87 MIRU Exeter #74, spud 14 3/4" hole at 5:30PM 3-22-87, TD at 370' 9:30PM
RU Matador Csg Crew, Run 9 jts 11 3/4", set at 370'. Circ. Csg.
RU Dowell, Cmt w/350 sx. C + 2% CaCl2 + Celloflake, displace w/42bbl FW.
Bump plug w/1000psi, Plug down 1AM, Circ. 178 sx to surface. Total WOC 16 hrs.

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

SIGNED M. E. Abim TITLE Staff Drilling Engineer DATE June 27, 1987

Orig. Signed by
Paul Kautz
Geologist

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED
JUN 30 1987
OCD
HOBBS OFFICE