

RECEIVED
Form 3160-5
June 1990
JAN 13 8 27 AM '92
CARL
AREA

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well

☐ Oil Well ☐ Gas Well ☒ Other INJECTOR

2. Name of Operator

Chevron U.S.A. INC.

3. Address and Telephone No.

P.O. BOX 1150 MIDLAND, TX 79702 915-687-7812 ATTN: P.R. MATTHEWS

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Sec. 4 T21S, R36E
1830 FSL & 2080 FWL

FORM APPROVED

Budget Bureau No. 1004-0135

Expires: March 31, 1993

5. Lease Designation and Serial No.

LC-031740-B

6. If Indian, Allottee or Tribe Name

N/A

7. If Unit or CA, Agreement Designation

EUNICE MONUMENT
SOUTH UNIT

8. Well Name and No.

EMSU #240

9. API Well No.

30-025-29867

10. Field and Pool, or Exploratory Area

EUNICE MONUMENT

11. County or Parish, State

LEA CO. New Mexico

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☐ Other

☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

MIRU, POOH WITH INJECTION EQUIP.
ACDZ ACROSS PERFS AT 3682-3875 WITH 3200 GALS
OF 15% NEFE.
SWAB BACK ACID.
TIH W/ INJECTION TBG AND PACKER - SET AT 3633'.
LOAD BACKSIDE WITH PACKER FLUID AND TEST
TO 320 PSI-OK.
RDMO RETURN TO INJECTION ON 1-8-92.

AM

14. I hereby certify that the foregoing is true and correct

Signed Rory Matthews

Title TECHNICAL ASSISTANT

Date 1-10-92

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any:

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

*See instruction on Reverse Side