

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other instructions on
reverse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

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—" for such proposals.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐ <u>Injector</u>	5. LEASE DESIGNATION AND SERIAL NO. LC-031740-B
2. NAME OF OPERATOR Chevron U.S.A. Inc.	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P.O. Box 670, Hobbs, New Mexico 88240	7. UNIT AGREEMENT NAME Funice Monument South Unit
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1780' FWL and 460' FNL	8. FARM OR LEASE NAME
14. PERMIT NO.	9. WELL NO. 182
15. ELEVATIONS (Show whether OF, AT, OR, ETC.) 3536.0GL	10. FIELD AND POOL, OR WILDCAT Funice Monument G/SA
	11. SEC. T. R. M. OR BLK. AND SURVEY OR AREA Sec. 4, T21S, R36E
	12. COUNTY OR PARISH Lea
	13. STATE NM

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON

CHANGE PLANE

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) completion

REPAIRING WELL

ALTERING CASING

ABANDONMENT

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

17. 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.)

6-28-87, run GR & CCL to 3300, perf 3800 to 3820 1JHPF. Spot 100 gallons acid f/ 3820-3720, set pkr, load backside to 500psi, brk perfs dn 1500psi, pmp 1500 gal acid and RCNBS. Swab residue. Mix scale inhibitor, pmp dn tbq. Chg pipe rams to 2 3/8", TIH injection equipment. Tst to 600psi, ok. Release rig. 6-29-87

ACCEPTED FOR RECORD

SJS

JUL 22 1987

CARLSBAD, NEW MEXICO

JUL 15 11 39 AM '87
CARLSBAD RESOURCE
AREA HEADQUARTERS

RECEIVED

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

SIGNED M. E. Ahumada TITLE STAFF DRILLING ENGINEER DATE JULY 13, 1987

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side