Submit 3 Copies to Appropriate

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103 Revisied 1-1-89

District Office

OIL CONSERVATION DIVISION

P.O. Box 2088

State of New Mexico	1
and Natural Resources Department	1

DISTRICT I	Santa Fe, Ne	w Mexico 87504-2088		
P.O. Box 1980, Hobbs, NM 88240			API NO. (assigned by OCD on New Wells)	
DISTRICT II			30-025-31409	
P.O. Drawer Dd, Artesia, NM 88210 DISTRICT III			5. Indicate Type of Lesse	
1000 Rio Brazos Rd., Aztec, Nm 87416	0		STATE X FEE	
			6. State Oil & Gas Lease No.	
			N/A	
_	SUNDRY NOTICES AND REPORTS	· · · · -		
,	S FORM FOR PROPOSALS TO DRILL OR 1		7. Lease Name or Unit Agreement Name	
j D	DIFFERENT RESERVOIR. USE "APPLICATI		EUNICE MONUMENT SOUTH UNIT	
	(FORM C-101) FOR SUCH PROPOSAL	S.)		
1. Type of Well: OIL	GAS			
WELL X	WELL OTHER			
2. Name of Operator			B. Well No.	
CHEVRON U.S	.A. INC.		639	
3. Address of Operator			9. Pool name or Wildcat	
P.O. BOX 1150 MIDLAND	D, TX 79702 ATTN: P.R. MATTH	IEWS	EUNICE MONUMENT/GB 4/4	
4. Well Location	1280 Feet From The	EAST Line and	1330 Feet From The SOUTH Line	
		848	1330 Feet From The SOUTH Line 36E NMPM LEA County	
Section 5	Township	(Show whether DF, RKB, RT, GR, etc.)	SOL NAMPA LEA COUNTY	
		3576 GE		
11	Check Appropriate Box to Indecate Nat	ure of Notice, Report, or Other Data		
NOTICE OF IN	TENTION TO:	SUBSEQUENT RE	PORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTER CASING	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING OPNS.	PLUG AND ABAN.	
PULL OR ALTER CASING	7	CASING TEST AND CMT JOB		
OTHER:		OTHER: DRILLING SUMMA	RY X	
12. Describe Proposed or Completed	Operations(Clearly state all pertinent details, and o	give pertinent dates, including		
esticated date of starting any propo	psed work) SEE RULE 1103.			

MOVE IN TMBR/SHARP RIG #17 ON 12-03-91.

SPUD 12 1/4" HOLE AT 20:00 HRS ON 12-05-91

DRILL AND SURVEY FROM 0'-1226'.

RUN 8 5/8",23#,CASING TO 1226'.

PUMP 780 SXS OF CEMENT AND CIRCULATE 208 SXS TO SURFACE.

WAIT ON CEMENT FOR 12 HRS.

	ALL WELL HEAD AND TEST . OUT CMT AND BEGIN DRIL		FORMATION.		
		_			
hereby certify that the in	oformation above is true and complete to the R. Musden	TITLE	TECH. ASSISTANT	DATE:	12-05-91
TYPE OR PRINT NAME	P.R. MATTHEWS			TELEPHONE NO	. (915)687-7812
APPROVED BY	Orig. Sign ay Paul Kauuz val. 16 anyl. Geologist	TITLE		DATE	