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APPROVED BY

CONDITIONS OF APPROVAL, IF ANY

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

District Office OIL CONSERVATION DIVISION DISTRICT I WELL API NO. P.O. Box 1980, Hobbs NM 88241-1980 P.O. Box 2088 30-025-31425 DISTRICT II Santa Fe, New Mexico 87504-2088 5. Indicate Type of Lease P.O. Drawer DD, Artesia, NM 88210 STATE X FEE 🗌 DISTRICT III 6. State Oil & Gas Lease No. 1000 Rio Brazos Rd., Aztec, NM 87410 SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well: EUNICE MONUMENT SOUTH UNIT WELL X WELL OTHER 2. Name of Operator 8. Well No. 625 Chevron U.S.A. Inc. 9. Pool name or Wildcat 3. Address of Operator EUNICE MONUMENT; GRAYBURG-SAN ANDRES P.O. Box 1150, Midland, TX 79702 4. Well Location SOUTH 2630 10 WEST Unit Letter Feet From The Feet From The Line and Line **21S** 36E LEA **NMPM** Township Range County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. **NOTICE OF INTENTION TO:** SUBSEQUENT REPORT OF: ALTERING CASING PLUG AND ABANDON REMEDIAL WORK PERFORM REMEDIAL WORK COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT TEMPORARILY ABANDON CHANGE PLANS CASING TEST AND CEMENT JOB PULL OR ALTER CASING SQZD PERFS 3680'-3894'; REPERFED OTHER: OTHER: _ 12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103. PMPD 190 SX CL "C" @ 3670'. TAGGED CMT @ POH W/TBG. SET CIBP @ 3729'. SET CICR @ 3670'. 3635'. DRILLED CICR & CMT TO 3728' (TOP OF CIBP). CIRC HOLE CLEAN. DRILLED CIBP & CMT TO 3900'. CIRC HOLE CLEAN. PERFD 3750'-3858' W/4 JHPF. PICKLED TBG W/500 GALS 25% ACID. ACZD W/9-1/2 BBLS ACID. RIH W/TBG, PUMP & RODS. RETURNED WELL TO PRODUCTION. WORK PERFORMED 10/28/96 - 11/5/96 I hereby certify that the information above is true and complete to the best of my knowledge and belief. TITLE TECHNICAL ASSISTANT 2/18/97 DATE SIGNATURE TELEPHONE NO. (915)687-7148 TYPE OR PRINT NAME ş. (This space for State Use) 8.315.4 1707248348