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 CONSER	VATION DIVISION	Ne	IVISIEC 1-1-89
DICTRICT		D. Box 2088 New Mexico 87504-2088		
DISTRICT I P.O. Box 1980, Hobbs, NM 88240	Santa re,	New Mexico 8/504-2088		
DISTRICT II			API NO. (assigned by OCO on New Wells)	
P.O. Drawer Od, Artesia, NM 88210	•		30-025-33187	
DISTRICT III			6. Indicate Type of Lease	
1000 Rio Brazos Rd., Aztec, Nm 874	410		STATE X	FEE
			6. State Oil & Gas Lease No. 2616	
	SUNDRY NOTICES AND REPO	RTS ON WELLS		
(DO NOT USE T	HIS FORM FOR PROPOSALS TO DRILL DIFFERENT RESERVOIR. USE "APPLIC (FORM C-101) FOR SUCH PROPO	CATION FOR PERMIT"	7. Lease Name or Unit Agreement Name EUNICE MONUMENT SOUTH	I UNIT
1. Type of Well: OIL WELL X	GAS WELL OTHER			
2. Name of Operator	C.A. INC		8. Well No.	
CHEVRON U. 3. Address of Operator	.S.A. INC.		649	
P.O. BOX 1150 MIDLAN	ID, TX 79702 ATTN: WENDI K	KINGSTON	9. Pool name or Wildcat EUNICE MONUMENT G-SA	
4. Well Location Unit Letter	XX: 210 Feet From	n The SOUTH Line and	40 Feet From The E	AST Line
Section 6	Township	21S Range	36E NMPM LEA	County
	10. Elev	vation(Show whether DF, RKB, RT, GR, etc.)		
11	Check Appropriate Box to Indecate	Nature of Notice, Report, or Other Data	- Vandaninaninanin	
NOTICE OF I	NTENTION TO:	SUBSEQUENT RI	EPORT 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		CASING TEST AND CMT JOB	=	لـــا
OTHER:		OTHER: NEW WELL COMP	PLETION	X
Describe Proposed or Completed esticated date of starting any pro-	d Operations(Clearly state all pertinent details, posed work) SEE RULE 1103.	and give pertinent dates, including		
SPUD WEI	LL 12/9/95. DRILL 12 1/4" HC	DLE TO 1190', SET 8 5/8" CSG	W/675 SX CMT	
CIRC SURI	F. DRILL 7 7/8" HOLE TO 406	4' TD. SET 5 1/2" CSG W/575	SX CMT TOC	
		CL LOG. PERF @3882'-3889', 3	· · · 	
		POT 100 GALS ACID ACROSS P		
	/8" TBG TO 3993'. WELL COM		2.0.0.	
71011 7774 /	, 5 . 15 . 10 . 0000			

APPROVED BY APPROVAL SIGNATED BY ARREY SEXTON TITLE CONDITIONS OF APPROVAL SERVING SERVING SEXTON	DATE	FEB 16 1996
TYPE OR PRINT NAME WENDI KINGSTON	TELEPHONE NO.	(915)687-7826
SIGNITURE THE TECH. ASSISTANT	DATE:	02/1/96

