

DISTRICT I

P.O. Box 1980, Hobbs, NM 88240

DISTRICT II

P.O. Box Drawer DD, Artesia, NM 88210

DISTRICT III

1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

WELL API NO.

30-025-34215

5. Indicate Type of Lease

STATE ☒FEE ☐

6. State Oil / Gas Lease No.

7. Lease Name or Unit Agreement Name

EUNICE MONUMENT SOUTH UNIT

8. Well No.

699

9. Pool Name or Wildcat

GRAYBURG SAN ANDRES

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT
(FORM C-101) FOR SUCH PROPOSALS.

1. Type of Well: OIL WELL ☒ GAS WELL ☐ OTHER

2. Name of Operator

CHEVRON USA INC

3. Address of Operator

15 SMITH ROAD, MIDLAND, TX 79705

4. Well Location

Unit Letter H : 2562 Feet From The NORTH Line and 100 Feet From The EAST Line

Section 10 Township 21-S Range 36-E NMPM LEA COUNTY

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

3580' GL

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☒PLUG AND ABANDON ☐TEMPORARILY ABANDON ☐CHANGE PLANS ☐PULL OR ALTER CASING ☐

OTHER:

PERF & ACIDIZE ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ALTERING CASING ☐COMMENCE DRILLING OPERATION ☐PLUG AND ABANDONMENT ☐CASING TEST AND CEMENT JOB ☐

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.

CHEVRON U.S.A. INTENDS TO CLEAN OUT, PERF, AND ACIDIZE THE SUBJECT WELL.

- 1) VERIFY ANCHORS HAVE BEEN SET & TESTED.
- 2) MIRU PU. NDWH. NUBOP.
- 3) TOH W/RDS, PUMP & TBG.
- 4) TIH W/BIT & CSG SCRAPER TO TD @ 3893'. CIRC CLN.
- 5) RU WL. PERF 3702-12, & 3718-28.
- 6) TIH W/PKR & SET @ 3600'.
- 7) ACIDIZE PERFS W/4500 GALS 15% FOAMED ACID IN 3 STAGES W/3500 GALS 2% KCL.
- 8) SWAB BACK SPENT ACID.
- 9) TIH W/PRODUCTION TBG & PMPNG EQPT.
- 10) NDBOP. NUWH. RDPU.
- 11) PLACE WELL BACK ON PRODUCTION.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE

TITLE

Regulatory Specialist

DATE 7/3/2002

TYPE OR PRINT NAME

Denise Leake

Telephone No.

915-687-7375

(This space for State Use)

APPROVED

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

JUL 9 2002
DeSoto/Nichols 12-93 ver 1.0

ORIGINAL SIGNED BY
GARY W. WINK
OC FIELD REPRESENTATIVE II/STAFF MANAGER