

Submit 3 Copies
to Appropriate
District Offices

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
310 Old Santa Fe Trail, Room 206
Santa Fe, New Mexico 87503

WELL API NO.
30-025-34825

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

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"
(FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:

OIL WELL ☒

GAS WELL ☐

OTHER

2. Name of Operator
CHEVRON U.S.A., INC.

7. Lease Name or Unit Agreement Name

EUNICE MONUMENT SOUTH
UNIT

3. Address of Operator
P. O. BOX 1150 MIDLAND, TX 79702

8. Well No.
710

9. Pool name or Wildcat
EUNICE MONUMENT; GRAYBURG-SA

4. Well Location
Unit Letter N : 1170 Feet From The SOUTH Line and 1425 Feet From The WEST Line
Section 10 Township 21S Range 36E NMPM LEA County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3573'

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: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDON ☐

CASING TEST AND CEMENT JOB ☐

OTHER: COMPLETION ☒

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.

PERFD 3884'-3919' W/3 JHPF. SET CIBP @ 3721'. ACZD W/1100 GALS 15% HCL. SWABBED.
PERFD 3792'-3860' W/3 JHPF. ACZD W/1600 GALS 15% HCL. SWABBED. SET CIGR @ 3702'.
SQZD ALL PERFS W/150 SX CMT @ 1600 PSI. DUMPED 6' CMT ON CIGR. DRILLED CMT & CIGR
TO 3922'; TAGGED CIBP @ 3925'. TSTD SQZ TO 320# 15 MIN. PERFD 3826'-3919' W/ 3
JHPF. ACZD W/2068 GALS 15%. SWABBED. RIH W/TBG TO 3807'. RIH W/PUMP & RODS.

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

SIGNATURE J. K. Ripley TITLE REGULATORY O.A. DATE 05/10/2000

TYPE OR PRINT NAME J. K. RIPLEY TELEPHONE NO. (915)687-7148

(This space for State Use)

APPROVED BY MARY WICK TITLE SECRETARY DATE 5/10/2000

CONDITIONS OF APPROVAL, IF ANY: