Form C-103 State of New Mexico Submit 3 Copies To Appropriate District Energy, Minerals and Natural Resources Revised March 25, 1999 Office District I WELL API NO. 1625 N. French Dr., Hobbs, NM 87240 30-025-34825 District II OIL CONSERVATION DIVISION 811 South First, Artesia, NM 87210 5. Indicate Type of Lease 2040 South Pacheco District III STATE | FEE x 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 District IV 6. State Oil & Gas Lease No. 2040 South Pacheco, Santa Fe, NM 87505 SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name: (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: EUNICE MONOMENT SOUTH UNIT Oil Well Gas Well Other 8. Well No. 2. Name of Operator 710 Chevron U.S.A. Inc. 9. Pool name or Wildcat Address of Operator EUNICE MONIMENT; GRAYBURG-SAN ANDRES P.O. Box 1150 Midland, TX 79702 4. Well Location 1425 feet from the\_ SOUTH line 1170 feet from the line and\_ Unit Letter \_\_\_\_ 36E **NMPM** County LEA Township 215 Range 10 Section 10. Elevation (Show whether DR, RKB, RT, GR, etc.) 3573' 11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data SUBSEQUENT REPORT OF: NOTICE OF INTENTION TO: REMEDIAL WORK **ALTERING CASING** PLUG AND ABANDON PERFORM REMEDIAL WORK **PLUG AND** COMMENCE DRILLING OPNS. **CHANGE PLANS TEMPORARILY ABANDON** ABANDONMENT CASING TEST AND **PULL OR ALTER CASING MULTIPLE CEMENT JOB** COMPLETION 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation. SPUDDED 12-1/4" HOLE 1/25/00. DRILLED TO 542', SET 9-5/8" CSG. CMTD W/350 SX CL "C", CIRC TO SURF. DRILLED TO 3931', SET 7" CSG. CMTD W/670 CL "C", CIRC TO SURF. I hereby certify that the information above is true and complete to the best of my knowledge and belief. TITLE REGULATORY O.A. 3/16/00 \_DATE \_\_ **SIGNATURE** Telephone No. (915)687-7148 Type or print name J. (This space for State use) . . . . . . DATAR 22 2000 TITLE APPROVED BY\_

Conditions of approval, if any: