Form C-103 State of New Mexico Submit 3 Copies To Appropriate District Energy, Minerals and Natural Resources Cifice Revised March 25, 1999 District I WELL API NO. 1625 N. French Dr., Hobbs, NM 87240 30-025-34826 District II OIL CONSERVATION DIVISION 811 South First, Artesia, NM 87210 5. Indicate Type of Lease 2040 South Pacheco District III FEE \square STATE X Santa Fe, NM 87505 1000 Rio Brazos Rd., Aztec, NM 87410 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: FUNTOE MONUMENT SOUTH UNIT Oil Well Gas Well Other 8. Well No. 2. Name of Operator 735 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 1220 275 feet from the_ NORTH line and feet from the line Unit Letter ____ **NMPM** County LEA Section 15 Township 21S Range 3Œ 10. Elevation (Show whether DR, RKB, RT, GR, etc.) 35781 11. Check Appropriate Box to Indicate, Nature of Notice, Report, or Other Data SUBSEQUENT REPORT OF: NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK **ALTERING CASING** PLUG AND ABANDON REMEDIAL WORK COMMENCE DRILLING OPNS. PLUG AND **TEMPORARILY ABANDON CHANGE PLANS** \mathbf{x} 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 2/4/00. DRILLED TO 514', SET 9-5/8" CSG. CMTD W/300 SX CL "C"; RAN TS, CMT @ 18'. ORDERED 100 SX "C"; RAN 20' STEEL HOSE IN WELL, BROUGHT CMT TO SURF. DRITLED TO 3925', SET 7" CSG. CMTD W/1025 SX CL "C", CIRC TO SURF. I hereby certify that the information above is true and complete to the best of my knowledge and belief. _DATE ___ **SIGNATURE** Telephone No. Type or print name J. K. RIPLEY (This space for State use)

_ TITLE_

DATE

APPROVED BY_

Conditions of approval, if any: