Submit 3 Copies To Appropriate District	State of New Mexico	Form C-103
District I	y, Minerals and Natural Resources	Revised March 25, 1999 WELL API NO.
1625 N. French Dr., Hobbs, NM 87240 District II	CONCEDIATION DIVISION	30-025-35161
811 South First, Artesia, NM 87210	CONSERVATION DIVISION 2040 South Pacheco	5. Indicate Type of Lease
District III 1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505	STATE 😿 FEE 🗌
District IV 2040 South Pacheco, Santa Fe, NM 87505	•	5. State Oil & Gas Lease No.
SUNDRY NOTICES AND (DO NOT USE THIS FORM FOR PROPOSALS TO DIFFERENT RESERVOIR. USE "APPLICATION FOR PROPOSALS.)	DRILL OR TO DEEPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name:
1. Type of Well:	her	EUNICE MONUMENT SOUTH UNIT
2. Name of Operator		8. Well No.
Chevron U.S.A. Inc.		9. Pool name or Wildcat
3. Address of Operator P.O. Box 1150 Midland, TX 79702		EUNICE MONUMENT; GRAYBURG-SAN ANDRES
4. Well Location		
Unit Letter 4 13 : 3850	_feet from the line and	1260 feet from the WEST line
Section 5	Township 21S Range 36E	NMPM County LEA
10. Ele	evation (Show whether DR, RKB, RT, GR, et 3590'	tc.)
11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data		
NOTICE OF INTENTION	N TO: SUE	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG	AND ABANDON REMEDIAL WORK	☐ ALTERING CASING ☐
TEMPORARILY ABANDON CHANG	GE PLANS COMMENCE DRILL	ING OPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING MULTI COMP	PLETION CASING TEST AND CEMENT JOB	
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 12/6/00. DRILLED TO 500', SET 9-5/8" CSG. CMID W/350 SX CL "C", CIRC TO SURF. DRILLED TO 4076', SET 7" CSG @ 4073'. CMID W/925 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. SIGNATURE JK. RESULATORY O.A. DATE 1/2/01		
' / //		Felephone No. (915) 687-7148
Type or print name J. K. RTPLEY (This space for State use)	S.F.	
•	· · · · · · · · · · · · · · · · · · ·	DATE Spring 10 5 7(11)
APPROVED BYConditions of approval, if any:	TITLE	DATE