Submit 3 Copies To Appropriate District State of New Mexico Form C-103 Office Eticagy, Minerals and Natural Resources Revised March 25, 1999 District 1 1625 N. French Dr., Hobbs, NM 87240 WELL API NO. District II OIL CONSERVATION DIVISION 30-025-35457 811 South First, Artesia, NM 87210 5. Indicate Type of Lease District III 2040 South Pacheco 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 STATE x FEE \square District IV 2040 South Pacheco, Santa Fe, NM 87505 6. State Oil & Gas Lease No. SUNDRY NOTICES AND REPORTS ON WELLS 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 MONUMENT SOUTH UNIT Oil Well X Gas Well Other 2. Name of Operator 8. Well No. Chevron U.S.A. Inc. 676 3. Address of Operator 9. Pool name or Wildcat P.O. Box 1150 Midland, TX 79702 EUNICE MONUMENT; GRAYBURG-SAN ANDRES 4. Well Location Unit Letter 1260 NORTH feet from the line and _ feet from the_ line Section 8 Township Range **NMPM** County 10. Elevation (Show whether DR, RKB, RT, GR, etc.) 3574' 11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK **ALTERING CASING TEMPORARILY ABANDON CHANGE PLANS** COMMENCE DRILLING OPNS. PLUG AND \mathbf{x} ABANDONMENT PULL OR ALTER CASING **MULTIPLE** CASING TEST AND COMPLETION **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 5/27/01. DRILLED TO 506', SET 9-5/8" CSG. CMTD W/350 SX CL "C", CIRC TO SURF. DRILLED TO 3960', SET 7" CSG. CMID W/865 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. 6/18/01 _DATE _ Type or print name J. Telephone No. (915) 687-7148 (This space for State use) APPROVED BY_ TITLE DATE Conditions of approval, if any: