

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OCD-ARTESIA

FORM APPROVED  
OMB No 1004-0137  
Expires July 31, 2010

**SUNDRY NOTICES AND REPORTS ON WELLS**  
***Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.***

5 Lease Serial No  
NMLC029418A

6 If Indian, Allottee or Tribe Name

**SUBMIT IN TRIPLICATE – Other instructions on page 2**

1 Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator  
CHEVRON USA INCORPORATED COG Operating LLC (Agent)

3a. Address  
(Agent)  
550 W Texas Ave, Suite 100 Midland, TX 79701

3b Phone No. (include area code)  
432-685-4342

7 If Unit of CA/Agreement, Name and/or No  
NMNM71030C

8 Well Name and No  
Skelly Unit 672

9 API Well No.  
30-015-37881

4 Location of Well (Footage, Sec, T, R, M., or Survey Description)  
Sec 14 T17S R31E 1860FSL 2001FEL, Unit J

10 Field and Pool or Exploratory Area  
FREN; GLORIETA-YESO

11. Country or Parish, State  
EDDY COUNTY, NM

**12 CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA**

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input checked="" type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input type="checkbox"/> Other _____
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

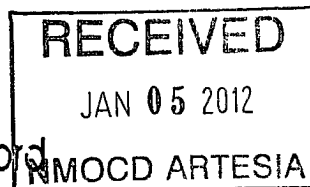
13 Describe Proposed or Completed Operation Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof If the proposal is to deepen directionally or recomplate horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones Attach the Bond under which the work will be performed or provide the Bond No on file with BLM/BIA Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 must be filed once testing has been completed Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection )

Interim Reclamation complete.

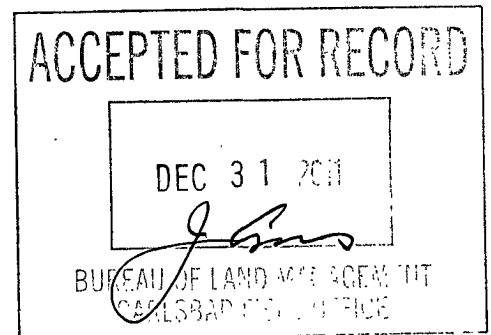
Downsized:  
70'on the South side

Ready for inspection.

Accepted for record  
NMOCD



TCS  
1/2/2012



14 I hereby certify that the foregoing is true and correct Name (Printed/Typed)

Netha Aaron

Title PREPARER

Signature

*Netha Aaron*

Date 10/06/2011

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved by

Title

Date

Conditions of approval, if any, are attached Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon

Office

Title 18 U S C Section 1001 and Title 43 U S C Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction

(Instructions on page 2)