

Submit 1 Copy To Appropriate District  
Office  
District I - (575) 393-6161  
1625 N. French Dr., Hobbs, NM 88240  
District II - (575) 748-1283  
811 S. First St., Artesia, NM 88210  
District III - (505) 334-6178  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV - (505) 476-3460  
1220 S. St. Francis Dr., Santa Fe, NM  
87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
Revised August 1, 2011

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

WELL API NO.	30-015-40756
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No. <b>Federal</b>	
7. Lease Name or Unit Agreement Name PLU PHANTOM BANKS 25 25 30 USA	
8. Well Number	1H
9. OGRID Number	4323
10. Pool name or Wildcat WC; G-05 S2630010; BONE SPRING	

SUNDRY NOTICES AND REPORTS ON WELLS (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: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator Chevron USA, Inc.	
3. Address of Operator 15 SMITH ROAD MIDLAND, TX 79705	
4. Well Location Unit Letter <u>C</u> : <u>150'</u> feet from the <u>SOUTH</u> line and <u>2280'</u> feet from the <u>West</u> line Section <u>25</u> Township <u>25S</u> Range <u>30 E</u> NMPM County <u>EDDY</u>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3340' GL	

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐  
DOWNHOLE COMMINGLE ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐

OTHER: ☐

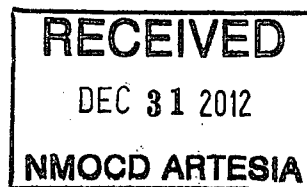
OTHER: Casing Pressure Test ☒

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Please find casing pressure tests performed on this well:

On 12/02/012, tested 13 3/8" surface casing for 30 minutes to 1200 psi. Test good. Depth 1320'

On 12/05/2012, tested 8 5/8" intermediate casing for 30 minutes to 1500 psi. Test good. Depth 4015'.



Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE

*Bryan G. Arrant*

TITLE Regulatory Specialist II

DATE 12/21/2012

Type or print name Bryan G. Arrant (Agent for Chevron) E-mail address: bryan.arrant@chk.com

PHONE: (405)935-3872

For State Use Only

APPROVED BY:

*BRDade*

TITLE Dist II Supervisor

DATE 1/4/13

Conditions of Approval (if any):