Submit 1 Copy To Appropriate District	State of New Mexico	Form C-103		
<u>District 1</u> – (575) 393-6161	Energy, Minerals and Natural Resources	Revised August 1, 2011		
1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283		WELL API NO. 30-015-40953		
811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION	5. Indicate Type of Lease		
<u>District III</u> – (505) 334-6178 · 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.	STATE X FEE		
District IV - (505) 476-3460	Santa Fe, NM 87505	6. State Oil & Gas Lease No.		
1220 S. St. Francis Dr., Santa Fe, NM 87505				
	S AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name WEST SHUGART 2 19 30 STATE		
	S TO DRILL OR TO DEEPEN OR PLUG BACK TO A TON FOR PERMIT" (FORM C-101) FOR SUCH	WEST SHOUART 2 19 30 STATE		
PROPOSALS.)	s Well Other	8. Well Number 2H		
1. Type of Well: Oil Well X Ga	s Well Other	9. OGRID Number		
2. Name of Operator Chevron, U S A	, Inc.	4323		
3. Address of Operator 15 Smith Road		10. Pool name or Wildcat		
Midland, TX 7	9705	DELWARE RIVER; BONE SPRING		
4. Well Location	2001 Free from the South Line and 250	Ol foot from the Foot Line		
Unit Letter 1 : 192 Section 2	feet from the South line and 350 Township 19 S Range 30 E			
	1. Elevation (Show whether DR, RKB, RT, GR, etc.			
	3517' GR			
•				
12. Check App	propriate Box to Indicate Nature of Notice,	Report or Other Data		
NOTICE OF INTE	NTION TO: SLIE	SSEQUENT REPORT OF:		
	PLUG AND ABANDON REMEDIAL WOR			
TEMPORARILY ABANDON 🔲 (•	ILLING OPNS. P AND A		
	MULTIPLE COMPL	IT JOB		
DOWNHOLE COMMINGLE				
OTHER:	☐ OTHER:	. 🗆		
	ed operations. (Clearly state all pertinent details, ar			
of starting any proposed work) proposed completion or recom	. SEE RULE 19.15.7.14 NMAC. For Multiple Co	impletions: Attach wellbore diagram of		
• •	•	OT 2 10 CTATE 2H		
	ed casing and cement plan for the WEST SHUGAI rmation for the C-103 permit, please advise.	RI 2 19 STATE 2H Well.		
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		RECEIVED		
		UECEIVED		
		MAY 1 4 2013		
		NMOCD ARTESIA		
Spud Date:	Rig Release Date:			
I house a contife that the information is		11.6		
Thereby certify that the information abo	ve is true and complete to the best of my knowledg	ge and belief.		
SIGNATURE // /km	TITLE Regulatory Specialist II	DATE 05/13/2013		
Type or print name Bryan Arrant (Ager	E-mail address: bryan.arrant@ch	PHONE: (405)025 2792		
For State Use Only	N/	PHONE: (405)935-3782		
7/1/20	NO DETERM	1/10/2 = 1/5/202		
APPROVED BY	TITLE VISITE SHOW	1/31 (DATE 3/13 /76/13		
Conditions of Approval (If any):	V	, ,		

West Shugart 2-19-30 State 2H

	Hole Size	Casing Size	Casing Weight	Setting Depth	Estimated TOC	Bottom of Cemented	Sacks of Cement
Туре	(")	(in)	(#'s)	(ft)	(ft) _	Interval (ft)	(sx)
Surface	17.5	13.375	48	650	0	650	685 .
Intermediate	12.25	9.625	40	3,500	. 0	3,500	1,500
	** Interme	diate Csg will be	e cemented in 2 st	ages with a Stage	Tool and External	Casing Packer @ +/- 1850	o'
Production	8.75	5.5	17	12,986	3,000	8,887	1,050

^{**} Lateral will be an OH Packer Completion (no cement) from TD to End of Curve (+/- 8,887). There will be a Stage Tool at the End of Curve to cement back up to 500' inside Intermediate csg thru.