| Submit One Copy To Appropriate District Office   | State of New Mexico                    |                          | Form C-103  |
|--|--|--------------------------|---|
| District I   | Energy, Minerals and Natural Resources |                          | Revised November 3, 2011                          |
| 1625 N. French Dr., Hobbs, NM 88240<br>District II   | istrict II                             |                          | WELL API NO.<br>30-015-32420                      |
| 811 S. First St., Artesia, NM 88210  |  |                          | 5. Indicate Type of Lease                         |
| District III 1000 Rio Brazos Rd., Aztec, NM 87410  | 1220 South St. Francis Dr.             |                          | STATE x□ FEE □                                    |
| <u>District IV</u><br>1220 S. St. Francis Dr., Santa Fe, NM  | Santa Fe, NM 87505                     |                          | 6. State Oil & Gas Lease No.                      |
| 87505  |  |                          |   |
| 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.)   |  |                          | 7. Lease Name or Unit Agreement Name Todd 2 State |
| 1. Type of Well: x Oil Well Gas Well Other   |  |                          | 8. Well Number 011                                |
| 2. Name of Operator  |  |                          | 9. OGRID Number                                   |
| Chevron USA Inc.   |  | To Date Military         |   |
| 3. Address of Operator<br>15 Smith Road, Midland, Texas 79705  |  | 10. Pool name or Wildcat |   |
| 4. Well Location   |  |                          |   |
| 1  | t from the North line and 1980 feet    |                          |   |
| Section <u>02</u> Township <u>24S</u> Range <u>31E</u> NMPM County <u>Eddy</u>   |  |                          |   |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3526  |  |                          |   |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data   |  |                          |   |
| 12. Check Appropriate box to indicate Nature of Notice, Report of Other Data   |  |                          |   |
| NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:  |  |                          |   |
| PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORTEMPORARILY ABANDON CHANGE PLANS COMMENCE DR  |  |                          |   |
| TEMPORARILY ABANDON DULL OR ALTER CASING   | CHANGE PLANS                           |                          |   |
| TOTAL ON THE COUNTY OF MOETHER COUNTY OF ONO HOLD CHIEF TO ONO HOLD CHIEF TO ON THE COUNTY OF THE CO |  |                          |   |
| OTHER:   |  |                          |   |
| All pits have been remediated in compliance with OCD rules and the terms of the Operator's pit permit and closure plan.  |  |                          |   |
| x Rat hole and cellar have been filled and leveled. Cathodic protection holes have been properly abandoned.  x A steel marker at least 4" in diameter and at least 4' above ground level has been set in concrete. It shows the  |  |                          |   |
| ALL Trouble in interest in admiral and an read a sector broadle for a man over set in contract the sector of the   |  |                          |   |
| OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, QUARTER/QUARTER LOCATION OR  |  |                          |   |
| UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATION HAS BEEN WELDED OR PERMANENTLY STAMPED ON THE MARKER'S SURFACE.   |  |                          |   |
| TERMANENTE STANFED ON THE MARKER'S SURFACE.  |  |                          |   |
| x The location has been leveled as nearly as possible to original ground contour and has been cleared of all junk, trash, flow lines and   |  |                          |   |
| other production equipment.  |  |                          |   |
| <ul> <li>Anchors, dead men, tie downs and risers have been cut off at least two feet below ground level.</li> <li>If this is a one-well lease or last remaining well on lease, the battery and pit location(s) have been remediated in compliance with</li> </ul>  |  |                          |   |
| OCD rules and the terms of the Operator's pit permit and closure plan. All flow lines, production equipment and junk have been removed   |  |                          |   |
| from lease and well location.  |  |                          |   |
| x All metal bolts and other materials have been removed. Portable bases have been removed. (Poured onsite concrete bases do not  |  |                          |   |
| have to be removed.)  x All other environmental concerns have been addressed as per QCD rules.   |  |                          |   |
| x Pipelines and flow lines have been abandoned in accordance with 19.15.35.10 NMAC. All fluids have been removed from non-   |  |                          |   |
| retrieved flow lines and pipelines.  |  |                          |   |
| x If this is a one-well lease or last remaining well on lease: all electrical service poles and lines have been removed from lease and   |  |                          |   |
| well location, except for utility's distribution infrastructure.   |  |                          |   |
| When all work has been completed return this form to the appropriate District office to schedule an inspection.  |  |                          |   |
| SIGNATURE Scult Gens TITLE FACILITY Ste MAMES DATE 12/01/16  |  |                          |   |
| TYPE OR PRINT NAME 150H JONES E-MAIL: MSQQ Chaven, Com PHONE: 970 570 - 3030   |  |                          |   |
| For State Use Only DENIED  |  |                          |   |
| APPROVED BY:   | TITLE_                                 |                          | DATE 12/8/2016                                    |

Conditions of Approval (if any):

NO DRY HOLE MARKEN