

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  
**HOBBS OCD**  
 OIL CONSERVATION DIVISION  
 220 South St. Francis Dr.  
 Santa Fe, NM 87505

|   |  |
|---|--|
| WELL API NO.<br>30-025-37187  |  |
| 5. Indicate Type of Lease<br>STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>   |  |
| 6. State Oil & Gas Lease No.  |  |
| 7. Lease Name or Unit Agreement Name<br>EUNICE KING   |  |
| 8. Well Number 29   |  |
| 9. OGRID Number 4323  |  |
| 10. Pool name or Wildcat<br>PENROSE; SKELLY GRAYBERG  |  |
| SUNDRY NOTICES AND REPORTS ON WELLS<br>(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<br>CHEVRON U.S.A. INC.  |  |
| 3. Address of Operator<br>15 SMITH ROAD, MIDLAND TEXAS 79705  |  |
| 4. Well Location<br>Unit Letter F : 1340 feet from the NORTH line and 2620 feet from the WEST line<br>Section 28 Township 21-S Range 37-E NMPM County LEA   |  |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)  |  |

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

|  |   |   |  |
|--|---|---|--|
| <b>NOTICE OF INTENTION TO:</b>                 |   | <b>SUBSEQUENT REPORT OF:</b>                        |  |
| PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/>              | ALTERING CASING <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/>   | CHANGE PLANS <input type="checkbox"/>     | COMMENCE DRILLING OPNS. <input type="checkbox"/>    | P AND A <input type="checkbox"/>         |
| PULL OR ALTER CASING <input type="checkbox"/>  | MULTIPLE COMPL <input type="checkbox"/>   | CASING/CEMENT JOB <input type="checkbox"/>          |  |
| DOWNHOLE COMMINGLE <input type="checkbox"/>    |   |   |  |
| OTHER: <input type="checkbox"/>                |   | OTHER: CLEAN OUT & ACIDICE <input type="checkbox"/> |  |

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.  
 08-07-12. MIRU. TOH W/RODS & PUMP. TIH W/PKR SET @ 25' TEST BOP. TOH W/PKR. TOH W/PROD TBG. 08-08-12. TIH W/PKR SET @ 3621'. 08-09-12. N2 ACID TREAT W/5000 GALS 15% HCL FOAMED ACID + 2BBLs KCL & 3000 GALS OF NITROGEN FLUSH. 08-10-12. TOH W/ PKR TIH W/2-7/8" PROD TBG SET @ 4121' TAC # 3619' S/N 4032. 08-13-12. TIH W/RODS & PUMP. TEST PUMP. RDMO CLEAN LOCATION.

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 Scott Haynes TITLE PERMIT SPECIALIST DATE 11/06/2012  
 Type or print name SCOTT HAYNES E-mail address: TOXO@CHEVRON.COM PHONE: 432-687-7198  
**For State Use Only**

APPROVED BY: [Signature] TITLE DIST. MGR DATE 11-8-2012  
 Conditions of Approval (if any):

NOV 08 2012