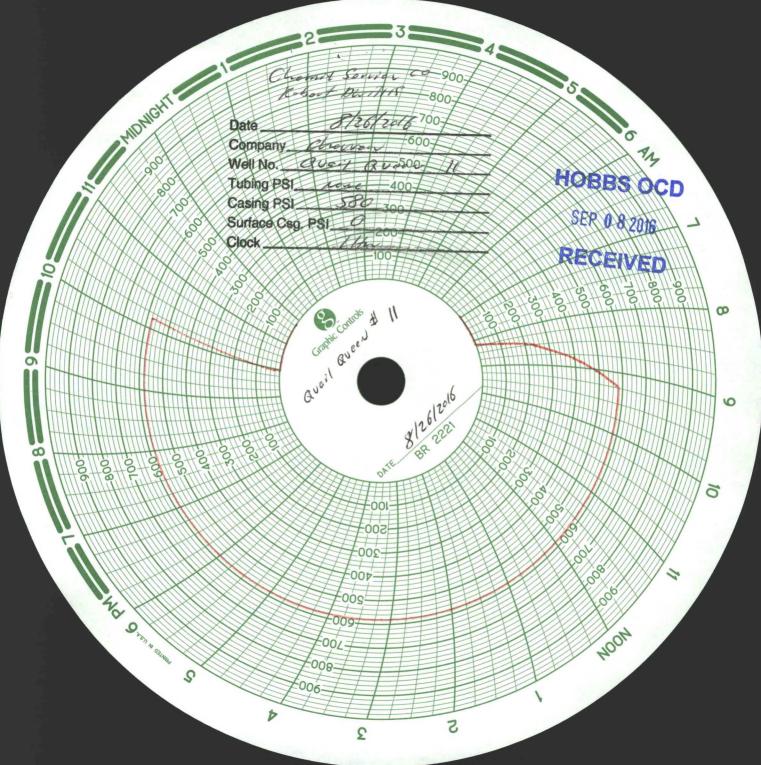
Submit 1 Copy To Appropriate District Office State of New Mexico Office Ninerals and Network Recovered	Form C-103 Revised August 1, 2011
Office  District I – (575) 748-1283  District II – (575) 748-1283	WELL API NO.
District II – (575) 748-1283	30-025-26707
811 S. First St., Artesia, NM 88210 OFF A 2015 CONSERVATION DIVISION	5. Indicate Type of Lease
	STATE S FEE
Santa Fe NM X/303	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NRECEIVED	
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.)	QUAIL QUEEN UNIT
1. Type of Well: Oil Well ☐ Gas Well ☒ Other INJECTOR	8. Well Number: 11
Name of Operator     Chevron USA INC	9. OGRID Number 4323
3. Address of Operator	10. Pool name or Wildcat
6301 DEAUVILLE BLVD., MIDLAND, TX 79706	QUAIL QUEEN
4. Well Location	
Unit Letter <u>A</u> : 990 feet from the <u>NORTH</u> line a	nd 990 feet from the East line
Section 11 Township 19S Range	NMPM County Lea
11. Elevation (Show whether DR, RKB, RT, GR	R, etc.)
3969' GL	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
E-PERMITTING <swdinjection> SUBSEQUENT REPORT OF:  REMEDIAL WORK</swdinjection>	
CONVERSION REDIVIS TAME	
RETURN TO TA COMMENCE DRILLING OPNS P AND A CASING/CEMENT JOB	
CASING/CE	MENT JOB
INT TO PA P&A NR P&A R	
	EMPORARILY ABANDON W/CHART
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.	
06/19/16-CALLED AND NOTIFIED NMOCD.	
06/20/16-MIRU. NDWH. NU BOP. SET 4-1/2" CIBP@4,880' AND DUMPBAILED 50' OF CEMENT ON TOP	
OF CIBP.	
06/21/16-TAGGED TOC@4,836 W/TUBING. DISPLACE HOLE WITH BIOCIDE AND OXYGEN	
SCAVENGER. POH AND LD TUBING. ND BOPE AND NU WH.	
06/22/16-TESTED CASING TO 600# FOR 30 MINUTES.	
08/26/2016- RETESTED CASING TO 580 PSI FOR 30 MINUTES.	
PLEASE FIND ATTACHED ORIGINAL CHART AND COPY.	
This Approval of Temporary	
	Abandonment Expires 8/26/2020
I hereby certify that the information above is true and complete to the best of my know	wledge and belief.
SIGNATURE Circle Murielo TITLE Permitting Specialist DATE 09/06/2016	
Type or print name <u>CindyHerrera-Murillo</u> E-mail address: <u>Cherreramurillo@chevron.com</u> PHONE: <u>575-263+-0431</u>	
APPROVED BY: Majur Brown TITLE Dist Supervisor DATE 9/8/2016	
Conditions of Approval (if any):	DAIL II OF COLO



HOBBS OCD

SEP 0 8 2016

## RECEIVED

