

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., Hobbs, NM 88210

District III - (505) 334-6178

1000 Rio Brazos Rd., Aztec, NM 87410

District IV - (505) 266-3460

1220 S. St. Francis Dr., Santa Fe, NM

87505

State of New Mexico
Energy, Minerals and Natural Resources

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

Form C-103
Revised July 18, 2013

WELL API NO.

30-025-32172

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

B F HARRISON B

8. Well Number #12

9. OGRID Number

4323

10. Pool name or Wildcat

SWD; FUSSELMAN

SECONDARY 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 ☐ Gas Well ☐ Other SWD

2. Name of Operator

CHEVRON USA INC

3. Address of Operator

1616 W. BENDER BLVD HOBBS, NM 88240

4. Well Location

Unit Letter C : 760 feet from the NORTH line and 2100 feet from the WEST line

Section 09 Township 23S Range 37E NMPM County LEA

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

3312'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 ☐

CLOSED-LOOP SYSTEM ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ P AND A ☐

CASING/CEMENT JOB ☐

OTHER: ANNUAL MIT 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.

CHEVRON USA INC HAS CONDUCTED THE MIT CHART AND ANNUAL BRADENHEAD TEST ON THE ABOVE WELL.

*** NOTE THIS TEST IS FOR UIC ANNUAL TESTING***

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

Cindy Herrera-Murillo

TITLE LEAD HSE REGULATORY AFFAIRS DATE 08/27/2020

Type or print name CINDY HERRERA-MURILLO E-mail address: Cherreramurillo@chevron.com PHONE: 575-263-0431

For State Use Only

APPROVED BY:

Kerry Int

TITLE C O A

DATE 9-3-20

Conditions of Approval (if any):

District I
 3435 N French Dr., Hobbs, NM 88240
 Phone: (575) 393-6161 Fax: (575) 393-0720

State of New Mexico
 Energy, Minerals and Natural Resources Department
 Oil Conservation Division Hobbs District Office

BRADENHEAD TEST REPORT

Operator Name Chevron USA INC	API Number 30-025-32172
Property Name Harrison BFB	Well No 12

Surface Location									
UL - Lot C	Section 9	Township 23S	Range 37E		Feet from 760	NS Line FWL	Feet From 2100	E/W Line FWL	County Lea

Well Status							
TA'D WELL YES ☒ NO	SHUT-IN YES ☒ NO	INJ INJ	INJECTOR ☒ SWD	OIL OIL	PRODUCER GAS	DATE 8-25-2020	

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Cmg	(E)Tubing
Pressure	0	0	NA	10	0
Flow Characteristics					
Puff	Y/N	Y/N	Y/N	Y/N	CO2 WTR GAS Type of Fluid Entered for Waterflood if applies
Steady Flow	Y/N	Y/N	Y/N	Y/N	
Surges	Y/N	Y/N	Y/N	Y/N	
Down to nothing	Y/N	Y/N	Y/N	Y/N	
Gas or Oil	Y/N	Y/N	Y/N	Y/N	
Water	Y/N	Y/N	Y/N	Y/N	

Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

Signature Clarence Fite	OIL CONSERVATION DIVISION
Printed name Clarence Fite	Entered into RBDMS
Title ALCR	Re-test
E-mail Address Fite@Chevron.Com	X
Date 8-25-20	
Phone 575-390-9084	
Witness	

INSTRUCTIONS ON BACK OF THIS FORM



