

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OCD Hobbs

HOBBS OCD

FORM APPROVED  
OMB NO. 1004-0135  
Expires: July 31, 2010**SUNDRY NOTICES AND REPORTS ON WELLS/AN 29 2013**  
*Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.***SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM96855
2. Name of Operator CHEVRON USA INCORPORATED		6. If Indian, Allottee or Tribe Name
Contact: DENISE PINKERTON E-Mail: leakejd@chevron.com		7. If Unit or CA/Agreement, Name and/or No.
3a. Address 15 SMITH ROAD MIDLAND, TX 79705	3b. Phone No. (include area code) Ph: 432-687-7375	8. Well Name and No. CROSS BONES 1-29 2H
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 29 T18S R32E NWSW 1980FSL 990FWL		9. API Well No. 30-025-40711-00-X1
		10. Field and Pool, or Exploratory LUSK
		11. County or Parish, and State LEA COUNTY, NM

## 12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other Drilling Operations
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomple horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recomple in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

11-15-12:MIRU. 11-20:TIH W/CBL LOGGING TOOLS. LOG 8190-6600. 11-26:TIH W/COILED TBG BHA.TAG @ 11,934.CIRC 1000 GALS 7.5% HCL TO CLEAN UP CMT.  
11-28:PERF 11909-12, 11800-03,11691-94,11582-85,11473-76. ACIDIZE W/3000 GALS 7.5% HCL ACID.  
12-10:SET FRAC PLUG @ 11,419. PERF 10928,11037-38,11146-47,  
11255-57, 11364-66. ACIDIZE W/6000 GALS 7 1/2% NEFE ACID. SET FRAC PLUG @ 10874. PERF 10383-84,  
10492-93, 10601-02, 10710-12, 10819-21. ACIDIZED W/6000 GALS 7 1/2% NEFE ACID. FRAC W/299,598 GALS  
PER HALLIBURTON DESIGN. 12-11: FRAC W/312,573 GALS LTR,&340322 GALS LTR. ACIDIZE W/9000 GALS 7  
1/2" FE ACID. SET FRAC PLUG @ 10,329.  
PERF:10276-78,10165-67,10056-57,9949-50,9838-39,9729-30,9625-26,9511-12,9402-03,9293-94,9184-85,9075-76,8966-67,8862, 8748-49  
76,8966-67,8862, 8748-49.  
12-15:PIPE STUCK @ 11628. 12-21:BEGIN FLOWBACK. OPEN WELL @ 350 PSI ON 14/64 CHOKE. 12-27:TIH  
W/RBP & SET @ 7570.

14. I hereby certify that the foregoing is true and correct.

Electronic Submission #184718 verified by the BLM Well Information System  
For CHEVRON USA INCORPORATED, sent to the Hobbs  
Committed to AFMSS for processing by KURT SIMMONS on 01/18/2013 (13KMS1696SE)

Name (Printed/Typed) DENISE PINKERTON

Title REGULATORY SPECIALIST

Signature (Electronic Submission)

Date 01/17/2013

## THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By <b>ACCEPTED</b>	JAMES A AMOS Title SUPERVISORY EPS	Date 01/27/2013
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.		Office Hobbs

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

\*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\*

FEB 04 2013

**Additional data for EC transaction #184718 that would not fit on the form**

**32. Additional remarks, continued**

1-11-13: RIG DOWN. WILL BE COMPLETED BY PRODUCTION GROUP TO RETRIEVE W/L, SET B/P, & RUN PUMP.