Submit I Copy To Appropriate District Office	State of New Mexico		Form C-103
istrict 1 – (575) 393-6161 Energy, Minerals and Natural Resources		Revised August 1, 2011 WELL API NO.	
1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283			30-025-08699
District III – (505) 334-6178 OIL CONSERVATION DIVISION 1220 South St. Francis Dr.			5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410 Sonto Ec. NM 97505			STATE FEE 6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NMJUL 1 0 2013 87505			6. State Off & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSAES (TO) DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH			7. Lease Name or Unit Agreement Name
			LOVINGTON PADDOCK UNIT.
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other INJECTION			8. Well Number 61
2. Name of Operator			9. OGRID Number 241333
CHEVRON MIDCONTINENT, L.P.			
3. Address of Operator 15 SMITH ROAD, MIDLAND, TEXAS 79705			10. Pool name or Wildcat LOVINGTON; PADDOCK
4. Well Location		LOVINGTON, FADDOCK	
Unit Letter: E 1980 feet from the NORTH line and 990 feet from the WEST line			
Section 1 Township 17S Range 36E NMPM County LEA			
11. Elevation (Show whether DR, RKB, RT, GR, etc.)			
And the state of t			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WORK			K ALTERING CASING
TEMPORARILY ABANDON			
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT DOWNHOLE COMMINGLE			I JOB
DOWNHOLE COMMINGLE			
OTHER: EXTEND TA STATUS OTHER			
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 MIDCONTINENT, L.P. INTENDS TO EXTEND THE TA STATUS OF THIS WELL FOR 2 YEARS.			
VERBAL APPROVAL WAS GIVEN TO SEAN HEASTER BY E.L. GONZALES, NMOCD, ON 06/27/2013			
UPON APPROVAL, MIT WILL BE RUN WITH CHART FOR THE NMOCD.			
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Spud Date:	Rig Release Da	te:	
I hereby certify that the information a	bove is true and complete to the be	st of my knowledge	e and belief
	1/ 1/ 1		
SIGNATURE ALE JULIAN TITLE: REGULATORY SPECIALIST DATE: 07/08/2013			
) Type or print name: DENISE PINKERTON E-mail address: <u>leakejd@chevron.com</u> PHONE: 432-687-7375			
For State Use Only			
APPROVED BY: DATE 7-11-2013			
Conditions of Approval: Notify OCD District office 24 hours prior to running the TA Pressure Test.			
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