Submit One Copy To Appropriate District Office	State of New Mexico		Form C-103	
District I 1625 N. French Dr., Hobbs, NN COLD Energy, Minerals and Natural Resources		Revised November 3, 2011 WELL API NO.		
DISTRICT II ON CONCERNATION DIVICIONI			30-025-05362	
811 S. First St., Artesia, NM 88210 District III SEP 2 6 2013 1220 South St. Francis Dr.			5. Indicate Type of Lease	
1000 Rio Brazos Rd., Aztec, NM 87410 Conta Eq. NIM 97505			STATE 6. State Oil & G	FEE
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505 RECEIVED			.b. State Off & G	as Lease No.
	S AND REPORTS ON WELLS	,	7. Lease Name of	or Unit Agreement Name
(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.)			Lovington San Andres Unit	
1. Type of Well: Oil Well Gas Well Other: Water Injection			8. Well Number: 20	
2. Name of Operator Chevron Midcontinent, L.P.			9. OGRID Number 241333	
3. Address of Operator 15 Smith Road Midland, TX 79705			10. Pool name or Wildcat Lovington; Grayburg San Andres	
4. Well Location	4		/	
	ne South line and 660 feet from	the East line	: /	
Section: 31 Township: 16-S Range: 37-E NMPM: County: Lea				
	1. Elevation (Show whether DR,)	
	817' KB			
12. Check Appropriate Box to In-	dicate Nature of Notice, Re	eport or Other D	D ata	
NOTICE OF INTE	NITION TO:	9110	SEQUENT RE	DOPT OF:
I Company of the comp	LUG AND ABANDON 🔀	REMEDIAL WOR	•	ALTERING CASING
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DR				
-	ULTIPLE COMPL	CASING/CEMEN		—
			;	
OTHER:			eady for OCD insp	
All pits have been remediated in compliance with OCD rules and the terms of the Operator's pit permit and closure plan. Rat hole and cellar have been filled and leveled. Cathodic protection holes have been properly abandoned.				
A steel marker at least 4" in diamet				
Trottor marker at reast 7 in diamet	or and at rouse i above ground i	iovo, mas ocom soc m	a constitution it bliow	
OPERATOR NAME, LEASE				
UNIT LETTER, SECTION,			<u>ON HAS BEEN W</u>	ELDED OR
PERMANENTLY STAMPE	ON THE MARKER'S SUR	FACE.		
The location has been leveled as nearly as possible to original ground contour and has been cleared of all junk, trash, flow lines and				
other production equipment.				
Anchors, dead men, tie downs and risers have been cut off at least two feet below ground level.				
If this is a one-well lease or last remaining well on lease, the battery and pit location(s) have been remediated in compliance with				
OCD rules and the terms of the Operator's pit permit and closure plan. All flow lines, production equipment and junk have been removed from lease and well location.				
All metal bolts and other materials have been removed. Portable bases have been removed. (Poured onsite concrete bases do not have				
to be removed.)				
All other environmental concerns have been addressed as per OCD rules.				
Pipelines and flow lines have been abandoned in accordance with 19.15.35.10 NMAC. All fluids have been removed from non-retrieved flow lines and pipelines.				
If this is a one-well lease or last ren	naining well on lease; all electri-	cal service poles ar	nd lines have been r	emoved from lease and well
location, except for utility's distribution			,	
When all work has been completed, retu	rn this form to the appropriate I	District office to sch	nedule an inspection	1,
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SIGNATURE / Sic / S	TITLE C.	enstruction	Rep (EMC)	DATE. <i>9-26-13</i> PHONE: <u>575-390-</u> 1412
TYPE OR PRINT NAME /5:11	13ECK E-MAIL:	wabs@cho	EUFON, COM	PHONE: <u>575- 390-</u> 1412
For State Use Only	ρ	^ -	601.	12/1
APPROVED BY: Wally	HOWN TITLE	omplian	re office	LDATE 10/1/2013
Conditions of Approval (if any):		•		/
		00	T 0 2 2013	dw.

MGB