

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., Artesia, NM 88210  
District III - (505) 334-6178  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV - (505) 476-3460  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
Revised July 18, 2013

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

WELL API NO. 30-025-33413
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name WEST DOLLARHIDE DRINKARD UNIT
8. Well Number 156
9. OGRID Number 4323
10. Pool name or Wildcat

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.)  
1. Type of Well: Oil Well ☐ Gas Well ☒ Other INJECTION **HOBBS OCD**

2. Name of Operator  
CHEVRON U.S.A. INC. **SEP 21 2015**

3. Address of Operator  
15 SMITH ROAD, MIDLAND TX 79705

4. Well Location  
Unit Letter I : 2000 feet from the SOUTH line and 1200 feet from the EAST line  
Section 32 Township 24S Range 38E NMPM County LEA

RECEIVED

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

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK	<input type="checkbox"/>
E-PERMITTING <SWD INJECTION>	<input type="checkbox"/>
CONVERSION	<input type="checkbox"/>
RETURN TO	<input type="checkbox"/>
CSNG	<input type="checkbox"/>
INT TO PA	<input type="checkbox"/>
ENVIRO	<input type="checkbox"/>
P&A NR	<input type="checkbox"/>
CHG LOC	<input type="checkbox"/>
P&A R	<input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
COMMENCE DRILLING OPNS.	<input type="checkbox"/>	P AND A	<input type="checkbox"/>
CASING/CEMENT JOB	<input type="checkbox"/>		
OTHER: TA W/CHART	<input type="checkbox"/>		

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.

09/23/2014: NOTIFIED NMOCD

CHEVRON U.S.A. INC. Respectfully requests to extend the TA status for subject well. MIT performed 09/09/2015 & tested @ 540 for 1 hour.

Original & Copy of Chart attached.

This Approval of Temporary  
Abandonment Expires **9/9/2016**

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:

*Dorian K Fuentes*

TITLE: Regulatory Specialist

DATE: 09/16/2015

Type or print name Dorian K Fuentes

E-mail address: [djvo@chevron.com](mailto:djvo@chevron.com)

PHONE: 432-687-7631

For State Use Only

APPROVED BY:

*Mary Brown*

TITLE

*Dist. Supervisor*

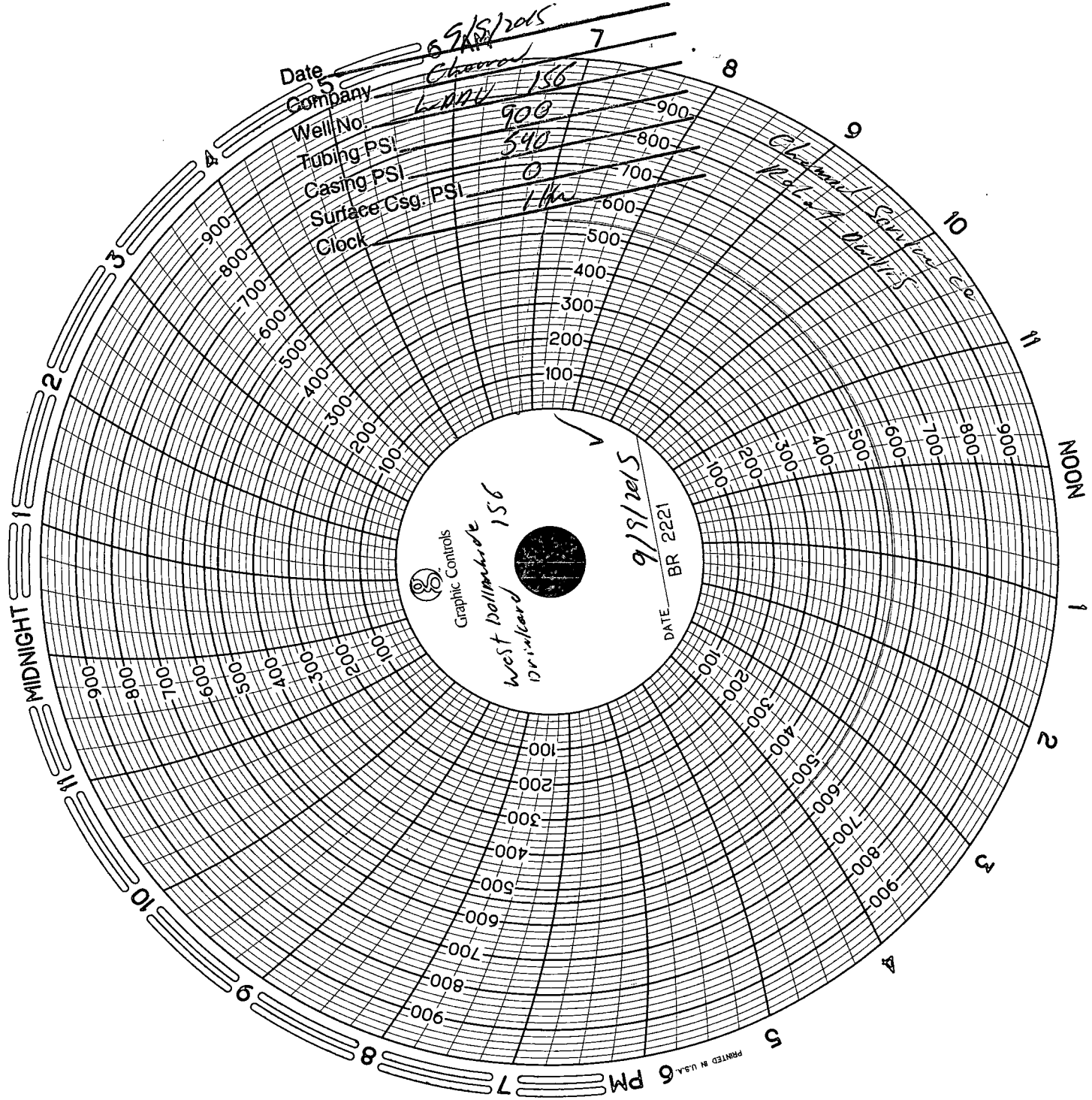
DATE

*9/21/2015*

Conditions of Approval (if any):

SEP 25 2015

*hm*



Date 9/19/2015  
Company Chloral  
Well No. 156  
Tubing PSI 900  
Casing PSI 540  
Surface Csg. PSI 0  
Clock 1 hr

Chloral Service Co  
West Dallamade



Graphic Controls

West Dallamade 156  
Drinkard

9/19/2015  
DATE BR 2221

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