UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

1	FORM APPROVED
	OMB NO. 1004-0135
	Expires: July 31, 2010
MOCD	5. Lease Serial No.

S. Lease Serial No. NMNM114998	
6. If Indian, Allottee or Tribe Name	 _

SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to re-enter an Hobbs abandoned well. Use form 3160-3 (APD) for such proposals.				NMNM114998 6. If Indian, Allottee or Tribe Name		
SUBMIT IN TRIPLICATE - Other instructions on reverse side.				7. If Unit or CA/Agreement, Name and/or No.		
1. Type of Well Gas Well Oth		8. Well Name and No. TALCO 25 25 35 FEDERAL 1H				
2. Name of Operator CHEVRON U.S.A. INC.		9. API Well No. 30-025-42548				
3a. Address 3b. Phone No. (include area code) 15 SMITH ROAD Ph: 432-687-7375 MIDLAND, TX 79705 Image: Company of the				10. Field and Pool, or Exploratory BONE SPRING		
4. Location of Well (Footage, Sec., T.	, R., M., or Survey Description)	WE THE TOTAL BUSINESS		11. County or Parish,	and State	
Sec 25 T25S R35E Mer NMP	FEB 0 8 2016	;	LEA COUNTY,	NM		
		BEC FIVED				
12. CHECK APPF	OPRIATE BOX(ES) TO IND	ICATE NATURE OF N	OTICE, RE	PORT, OR OTHE	R DATA	
TYPE OF SUBMISSION		TYPĘ OF	ACTION			
☐ Notice of Intent	☐ Acidize	☐ Deepen	☐ Production	on (Start/Resume)	☐ Water Shut-Off	
- ·	☐ Alter Casing	☐ Fracture Treat	☐ Reclamate	ion	■ Well Integrity	
Subsequent Report	□ Casing Repair	■ New Construction	Recomple	ete	` ⊠ Other Production Start-up	
☐ Final Abandonment Notice ☐ Change Plans ☐		☐ Plug and Abandon	□ Temporar	Temporarily Abandon Production St		
	Convert to Injection	☐ Convert to Injection ☐ Plug Back ☐ Water		sposal		
Attach the Bond under which the wor following completion of the involved	Ily or recomplete horizontally, give so k will be performed or provide the Bo operations. If the operation results in andonment Notices shall be filed only	ibsurface locations and measure nd No. on file with BLM/BIA. a multiple completion or recon	ed and true vert Required subs appletion in a ne	ical depths of all pertin equent reports shall be w interval, a Form 316	ent markers and zones. filed within 30 days 0-4 shall be filed once	
10/03/2015 THROUGH 10/12/ INTERVALS)	TACHED SUMMARY REPOR 2015: PERF 16137 - 12,005 (N VOLUME - 2,964,112 GALS,	SEE ATTACHED WELLE		•		
11/03/2015: SET 2 7/8" TBG (11/24/2015: ON 24 HR OPT.	@ 11,292'. (SEE ATTACHED FLOWING 814 OIL, 924 GAS,	TBG SUMMARY). RIG D . 1297 WATER. GOR - 1	OWN. 1135.			
	· ·					
	•			*.		
	•			•		
			·	<u> </u>		
14. I hereby certify that the foregoing is	Electronic Submission #326353	U.S.A. INC., sent to the Ho	obbs / /			
Name (Printed/Typed) DENISE P	INKERTON	Title REGULA	TORYSPE	\sim	<u> </u>	
		AUG	/ /	OK KECOKL		
Signature (Electronic S		Date 12/15/20/		-//-/ -	 / · · · · · · · · · · · · · · · · · · 	
	THIS SPACE FOR FE	DERAL OR STATE	FFICH US	56/1/01g/	ln 1	
Approved By		Title P	AU OF LANG	MANAGEMENT	Date	
onditions of approval, if any, are attached ertify that the applicant holds legal or equ thich would entitle the applicant to conduc	table title to those rights in the subjec	rrant or t lease Office	CARLSBAD F	ELD OFFICE		
itle 18 U.S.C. Section 1001 and Title 43 U.States any false, fictitious or fraudulent s	J.S.C. Section 1212, make it a crime f	or any person knowingly and w	villfully to make	to any department or a	gency of the United	

** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED **