

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

**HOBBS OCD**

**JUN 15 2017**

**RECEIVED**

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

WELL API NO.

**3002512359**

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

**B-1732**

7. Lease Name or Unit Agreement Name

**WEST DOLLARHIDE DRINKARD UNIT**

8. Well Number

**75**

9. OGRID Number

**4323**

10. Pool name or Wildcat

**DOLLARHIDE TUBB - DRINKARD**

**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 ☐

2. Name of Operator

**CHEVRON U.S.A.**

3. Address of Operator

**6301 DEAUVILLE BLVD MIDLAND, TX 79706**

4. Well Location

Unit Letter **D**: **990** feet from the **N** line and **330** feet from the **W** line

Section **4** -

Township **25-S**

Range **38-E**

NMPM

County **LEA**

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

**3154' DF**

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

**NOTICE OF INTENTION TO:**

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPL. ☐

DOWNHOLE COMMINGLE ☐

CLOSED-LOOP SYSTEM ☐

OTHER: ☐

**SUBSEQUENT REPORT OF:**

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

P AND A ☐

CASING/CEMENT JOB ☐

OTHER: **ANNUAL MIT TEST**

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 U.S.A. INC HAS CONDUCTED THE ANNUAL MIT TEST ON THE ABOVE WELL.  
CHART ATTACHED.**

**\*\*PLEASE NOTE THIS TEST IS FOR UIC ANNUAL TESTING\*\***

Spud Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE:

**Adriann Garcia**

TITLE: **REGULATORY ASSISTANT**

DATE: **June 14, 2017**

Type or print name: **Adriann Garcia**

E-mail address: **Adriann.Garcia@chevron.com**

PHONE: **432-687-7617**

**For State Use Only**

APPROVED BY:

**Kerry Fortner**

TITLE **Compliance Officer**

DATE **6-21-17**

Conditions of Approval (if any):



