			0 1 0010		
Submit One Copy To Appropriate District	State of New Me	xico	APR <b>01</b> 2019	Form C-103	
Office District I	Energy, Minerals and Natur		Revis	ed November 3, 2011	
1625 N. French Dr., Hobbs, NM 88240	Energy, winierals and Natural Resources		RVEC BINCE		
District II	OIL CONSERVATION	DIVISION	30-025-31296		
811 S. First St., Artesia, NM 88210 District III	1220 South St. Fran		5. Indicate Type of Lea	se	
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505		STATE	FEE 🛛	
District IV 1220 S. St. Francis Dr., Santa Fe, NM	Santa Pe, Mivi 87	505	6. State Oil & Gas Leas	e No.	
87505					
SUNDRY NOTIC	ES AND REPORTS ON WELLS		7. Lease Name or Unit		
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			LOVINGTON PADDO	CK UNIT	
PROPOSALS.)	ATION FOR PERMIT <sup>®</sup> (FORM C-101) FOR SUCH		8. Well Number		
1. Type of Well: Oil Well	Gas Well 🔲 Other		123		
2. Name of Operator			9. OGRID Number		
Chevron MIDCONTINENT			241333		
3. Address of Operator			10. Pool name or Wildo		
6301 Deauville Blvd., Midland, TX	79706		LOVINGTON PADDO	СК	
4. Well Location:					
Unit Letter_F_:2525_feet	from the <u>NORTH</u> line and <u>1420</u> f	eet from the <u>WEST</u>	line		
Section <u>6</u> Township <u>17</u>	7-S Range 37-E NMPM	County <u>LEA</u>	$\checkmark$		
	11. Elevation (Show whether DR,	RKB, RT, GR, etc.,		and the second states	
	3809' GR		100 C	and a state of the state	
12. Check Appropriate Box to I	Indicate Nature of Notice, Re	port or Other D	ata		
	_				
		REMEDIAL WOR			
	CHANGE PLANS	COMMENCE DRI CASING/CEMEN			
		CASING/CEMEN			
OTHER:		Location is re	eady for OCD inspection	after P&A	
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 diam	eter and at least 4' above ground l	evel has been set in	concrete. It shows the		
OPEDATOD NAME LEA	CENAME WELLNUNDED A	DI NUMBER OI			
	<u>SE NAME, WELL NUMBER, A</u> 1 TOWNSHIP, AND RANGE - A				
<u>UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATION HAS BEEN WELDED OR</u> PERMANENTLY STAMPED ON THE MARKER'S SURFACE.					
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$\boxtimes$ The location has been leveled as $\square$	nearly as possible to original grour	nd contour and has	been cleared of all junk, to	rash, 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 remaining well on lease: all electrical service poles and lines have been removed from lease and well					
location, except for utility's distributio	on infrastructure.				
When all work has been completed, return this form to the appropriate District office to schedule an inspection.					
	the appropriate D		and an mopeoron.		
		D · · · ·		F 2.00.10	
SIGNATURE <u>Katherine</u> Pay	<u>sageorge</u> TITLE	Decommissioning	Project ManagerDAT	E	
TYPE OR PRINT NAMEKatherin					
For State Use Only	- "hadeerDe" - in the "isothern				

APPROVED BY:	Kerry Joine	TITLE Compliance Office A	<sub>DATE</sub> 4-2-19
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