Submit One Copy To Appropriate District	State of New M	avico	Form C-103
Office District I	Energy, Minerals and Natural Resources		Revised November 3, 2011
1625 N. French Dr., Hobbs, NM 88240	Energy, wither and Water and Resources		WELL API NO.
District II 811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION		30-025-06866
District III	1220 South St. Francis Dr.		5. Indicate Type of Lease STATE FEE X
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505		6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505			
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name 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			CENTRAL DRINKARD UNIT
PROPOSALS.)			8. Well Number
1. Type of Well: Oil Well Gas Well Other 2. Name of Operator			#112 9. OGRID Number
Chevron U.S.A Inc.			4323
3. Address of Operator	MAY	2 3 2019	10. Pool name or Wildcat
6301 Deauville Blvd., Midland, TX 79	0706	-	DRINKARD
4. Well Location:			
Unit Letter_H_:1820_feet from the <u>NORTH</u> line and <u>200</u> feet from the <u>EAST</u> line			
	<u>-S</u> Range <u>37-E</u> NMPM 1. Elevation (Show whether DI	County <u>LEA</u>	1
	440' GR	λ, λλd, λ1, Ολ, εις.	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTE		SUB	
		REMEDIAL WOR	
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND A			
PULL OR ALTER CASING	IULTIPLE COMPL	CASING/CEMEN	т јов
OTHER:		☐ Location is n	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 diameter and at least 4' above ground level has been set in concrete. It shows the 			
A steel marker at least 4" in diameter and at least 4' above ground level has been set in concrete. It shows the			
OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, QUARTER/QUARTER LOCATION OR			
UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATION HAS BEEN WELDED OR DEPMANENTLY STAMPED ON THE MARKED'S SUBFACE			
PERMANENTLY STAMPED ON THE MARKER'S SURFACE.			
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 remaining well on lease: all electrical service poles and lines have been removed from lease and wel			
location, except for utility's distribution infrastructure.			
When all work has been completed, return this form to the appropriate District office to schedule an inspection.			
SIGNATURE <u>Katherine Papageorge</u> TITLE Decommissioning Project Manager DATE 5.22.19			
TYPE OR PRINT NAMEKatherine Papageorge_E-MAIL: _Katherine.Papageorge@chevron.com PHONE:832-854-5291			
For State Use Only			
APPROVED BY: KANA. FIT	TITLE (impliance	0 fpmer A DATE 5-30-19
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