

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 August 1, 2011

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

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.)		WELL API NO. 30-025-34250
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other Water Injection <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator Chevron U.S.A. INC.		6. State Oil & Gas Lease No.
3. Address of Operator 15 Smith Road Midland, TX 79705		7. Lease Name or Unit Agreement Name MAC "19"
4. Well Location Unit Letter <u>G</u> : <u>2523</u> feet from the <u>North</u> line and <u>2370</u> feet from the <u>East</u> line Section <u>19</u> Township <u>16-S</u> Range <u>36-E</u> NMPM County <u>Lea</u>		8. Well Number: 1
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3951' GL		9. OGRID Number: <u>241335</u> <u>4323</u>
		10. Pool name or Wildcat West Lovington Penn

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <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.

04-07-2014 - Spot 25 sks of Class H @ 11302' - 11032', WOC couldn't Tag, or pressure test
04-8-14 - Pressure test back side F-Surface- 11,000' holding
04-11-2014 - Set CIBP @ 11,288'w/25 sks Class H
04-15-2014 - 45 sks @ 9498' - 9101', Spot 45 sks 8301' 7904', Spot 45 sks 6459' - 6062'
04-16-2014 - Tag TOC, @ 5920', Perf @ 4374', Spot 30 sks @ 4432' - 4136', WOC & TAG, TOC @ 4147'
Perf @ 3200' @ 1600', Spot 30 sks @ 3255' - 2958'
04-17-2014 - Tag, TOC, @ 2982', Perf @ 2120', Sqz 60 sks of cement @ 2120' - 1920', WOC, TAG @ 1919'
Perf @ 550', Sqz 215 sks @ 550' - Surface, Well Complete

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 [Signature] TITLE Representative DATE 05/12/2014

Type or print name Robert Holden E-mail address: rholden@keyenergy.com PHONE: 432-523-5155

For State Use Only

APPROVED BY: [Signature] TITLE Dist. Supervisor DATE 6/16/2014 PM

JUN 17 2014