Submit 1 Copy To Appropriate District	State of New	Maxico	Earm C 102	
Office	Energy, Minerals and N		Form C-103 Revised July 18, 2013	
<u>District 1</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240	Energy, witherars and N	atural Resources	WELL API NO.	
<u>District II</u> - (575) 748-1283	OIL CONSERVATION	ON DIVISION	3002503905	
811 S. First St., Artesia, NM 88210 Distric <u>t III</u> – (505) 334-6178			5. Indicate Type of Lease	
1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. F		STATE FEE	
<u>District IV</u> $-$ (505) 476-3460	Santa Fe, NM	8/505	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			WEST LOVINGTON UNIT	
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCHOP PROPOSALS.)				
1. Type of Well: Oil Well	Jas well X Other Injector		8. Well Number 51	
2. Name of Operator	······································	AUG 06 2014	9. OGRID Number	
CHEVRON MIDCONTINENT, L.P.		HOO .		
3. Address of Operator		RECEIVED	10. Pool name or Wildcat	
15 SMITH ROAD MIDLAND, TX 797	05	RECEILE	WEST LOVINGTON	
4. Well Location				
Unit Letter_F _: 1980 _feet from the _NORTH _ line and _ 1896_feet from the _WEST _line				
Section 7 Tow	nship 17-S Range	36-E 🛩 N	MPM County LEA	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3915; DF				
		·····	Lands Carrier And Carling Carl, Karry C., North Manager St. 1999 And Antonio Strategy	
12. Check A	ppropriate Box to Indicate	e Nature of Notice,	Report or Other Data	
			SEQUENT REPORT OF:	
	PLUG AND ABANDON	REMEDIAL WOF		
		CASING/CEMEN		
CLOSED-LOOP SYSTEM				
OTHER:		OTHER: ANNUA	AL MIT TEST	

 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: Rig Rele	ase Date:
I hereby certify that the information above is true and complete to	the best of my knowledge and belief.
SIGNATURE: <u>All Guardian</u>	TITLE: REGULATORY ASSISTANT DATE:7/16/2014
Type or print name: Adriann Garcia E-mail address: Adrian	nn.Garcia@chevron.com PHONE: 432-687-7617
For State Use Only	Staff Manager DATE 8/11/2014
APPROVED BY: Biel Somamake TITLE	FOR RECORD ONLY
Conditions of Approval (if any):	AUG 1 2 2014

