HOBBS OCD

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	NOV 2 4 2014		
Submit One Copy To Appropriate District	State of New Me		Form C-103
Office District I	Energy, Minerals and Natu	ral Resources	Revised November 3, 2011
1625 N. French Dr., Hobbs, NM 88240		¢۲۲₽ ۲۹۳۵ (	WELL API NO.
District II 811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION		30-025- <del>03799</del> <b>09874</b>
District III	1220 South St. Francis Dr.		5. Indicate Type of Lease STATE STATE FEE
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505		6. State Oil & Gas Lease No.
District IV Salita PC, 1910 87505 1220 S. St. Francis Dr., Santa Fe, NM 87505			6. State Off & Gas Lease No.
	TICES 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 PROPOSALS.)			Lovington Paddock Unit
1. Type of Well: Oil Well Gas Well Other: Injection			8. Well Number: 036
2. Name of Operator: Chevron, Midcontinent, L.P.			9. OGRID Number: 241333
3. Address of Operator: 15 Smith Road, Midland, TX 79705			10. Pool name or Wildcat LOVINGTON; Paddock (Oil & Gas)
4. Well Location: Unit <u>O</u> <u>660</u> NMPM County Lea	feet from the <u>South</u> line and <u>2160</u> feet	from the <u>East</u> line S	Section: <u>31</u> Township: <u>16S</u> Range: <u>37E</u>
	11. Elevation (Show whether DR)	, RKB, RT, GR, etc.)	
12. Check Appropriate Box	to Indicate Nature of Notice, R		
PERFORM REMEDIAL WORK			
TEMPORARILY ABANDON	CHANGE PLANS  MULTIPLE COMPL	COMMENCE DRIL CASING/CEMENT	/
PULL OR ALTER CASING [ OTHER: [			ady for OCD inspection after P&A
	d in compliance with OCD rules and t		· · _ · _ · _ · _ · _ · _ ·
	filled and leveled. Cathodic protecti		
	liameter and at least 4' above ground		
<b>OPERATOR NAME, L</b>	EASE NAME, WELL NUMBER, A	API NUMBER, QU	ARTER/QUARTER LOCATION OR
	ION, TOWNSHIP, AND RANGE.		
PERMANENTLY STA	<b>MPED ON THE MARKER'S SUR</b>	FACE.	
	as nearly as possible to original grou	nd contour and has b	been cleared of all junk, trash, flow lines and
other production equipment.		(	
	is and risers have been cut off at least		
			have been remediated in compliance with action equipment and junk have been removed
from lease and well location.	perator s pit permit and closure plan.	An now mes, prout	action equipment and junk have been removed
	erials have been removed. Portable ba	ses have been remov	ved. (Poured onsite concrete bases do not have
to be removed.)			
	cerns have been addressed as per OCE	) rules.	
			All fluids have been removed from non-
retrieved flow lines and pipelines.			
		cal service poles and	l lines have been removed from lease and well
location, except for utility's distril	oution infrastructure.		
When all work has been complete	d, return this form to the appropriate I	District office to sch	edule an inspection
SIGNATURE: Jon DA		Construction Rep	DATE:/24/14/ ~~~
TYPE OR PRINT NAME Jon	<u>Ruff</u> E-MAIL:jruff@	Dchevron.com	PHONE: <u>916-708-8248</u>
For State Use Only	()	)	PHONE: 916-708-8248 PHONE: 916-708-8248 DATE 12/3/2014
APPROVED BY: Wah	Lethitake TITLE	muslis	Africer DATE 12 3/2014
Conditions of Approval (if any):	THE THE	- unit u on C	e unit Dait
Conditions of Approval (It any).			š
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			DEC 0 4 2014