

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 July 18, 2013

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. 30-025-27096
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input 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, TEXAS 79705		7. Lease Name or Unit Agreement Name USA QUAIL QUEEN UNIT
4. Well Location Unit Letter: M 660 feet from SOUTH line and 660 feet from the WEST line Section 11 Township 19S Range 34E NMPM County LEA		8. Well Number 7
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. OGRID Number 4323
		10. Pool name or Wildcat QUAIL; QUEEN

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

E-PERMITTING P P&A NR <input type="checkbox"/> P&A R <input type="checkbox"/> T INT TO P&A <input type="checkbox"/> COMP <input type="checkbox"/> P CSNG <input type="checkbox"/> CHG Loc <input type="checkbox"/> D TA <input checked="" type="checkbox"/> RBDMS CHART <input checked="" type="checkbox"/> C OTHER: <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: TA EXTENSION W/CHART
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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.

01/21/2015: NOTIFIED NMOCD. RAN CHART. PRESS TO 550 PSI FOR 32 MINUTES. WITNESSED BY NMOCD.
(ORIGINAL CHART & COPY OF CHART ATTACHED).

This Approval of Temporary
Abandonment Expires 1/21/2016 FINAL T/A

WELL IS TEMPORARILY ABANDONED.

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 Denise Pinkerton TITLE REGULATORY SPECIALIST DATE 02/24/2015
Type or print name DENISE PINKERTON E-mail address: leakejd@chevron.com PHONE: 432-687-7375
For State Use Only
APPROVED BY: Maureen Brown TITLE Dist. Supervisor DATE 2/26/2015
Conditions of Approval (if any):

MAR 02 2015

