Submit 1 Copy To Appropriate District Office	State o	Form C-103						
<u>District 1</u> – (575) 393-6161	Energy, Minerals and Natural Resources			r		Revised Jul	y 18, 2013	
1625 N. French Dr., Hobbs, NM 88240				WELL AP				
<u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION			30-025-05				
District III - (505) 334-6178	1220 South St. Francis Dr.			5. Indicate Type of Lease STATE SFEE				
1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> – (505) 476-3460	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					LOVINGTON PADDOCK UNIT			
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other INJECTOR					8. Well Number 026			
2. Name of Operator		H	JRR2 ()e	9. OGRID	Number	241333		
CHEVRON MIDCONTINENT, L	. <u>P.</u>							
3. Address of Operator 15 SMITH ROAD, MIDLAND, T	EXAS 79705	SI	PUS LUIS	10. Pool n PADDOC	ame or Wild K	cat		
4. Well Location								
	feet from SOUTH	line and 2160	RECEIVED feet from the	EAST line			,	
Section 31	Township	16S F	lange 37 E	NMPM	Cou	ity LEA	-	
	11. Elevation (Show))				
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12. Check A	Appropriate Box to l	Indicate Nat	ure of Notice,	Report or	Other Data			
					SEQUENT REPORT OF:			
						ERING CAS	SING 🗖	
TEMPORARILY ABANDON CHANGE PLANS					_			
PULL OR ALTER CASING 🔲 MULTIPLE COMPL 🔲 CASING/CEMEN								
CLOSED-LOOP SYSTEM						·		
OTHER: PLANS TO PLUG			OTHER:					
 Describe proposed or comp of starting any proposed we proposed completion or rec 	ork). SEE RULE 19.15.							
THE SUBJECT WELL FAILED TH	IF ANNUAL MIT ANI	D PLANS AR	F TO PLUG AN	D ARANDO	N THE WEI	L IN THE	NFAR	
FUTURE.	IE ANNOAL MIT AN	DILANS AK	E TO LEOG AN				NLAK	
		•	F					
Spud Date:	Rig	g Release Date	::					
			L					
I hereby certify that the information	above is true and comp	late to the bes	of my knowledge	a and baliaf				
Thereby certify that the mormation	above is the and comp		t of my knowledg	ge and benef.				
SIGNATURE MASSING	TRETON TI	TLE REGUI	ATORY SPECI	ALIST	DATE	09/02/2015	5	
Type or print name DENISE PINK For State Use Only	ERTON E-	mail address:	leakejd@chevro	on.com	PHONE:	432-68	7-7375	
APPROVED BY:	Accepted for	Record Or			DATE			
Conditions of Approval (if any):	NINE A	In Ioni	<u> </u>			_	_	
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