

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NMOCD
Hobbs

FORM APPROVED
OMB NO. 1004-0135
Expires: July 31, 2010

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM113418
2. Name of Operator CHEVRON MIDCONTINENT LP Contact: DENISE PINKERTON E-Mail: leakejd@chevron.com		6. If Indian, Allottee or Tribe Name
3a. Address 15 SMITH ROAD MIDLAND, TX 79705	3b. Phone No. (include area code) Ph: 432-687-7375	7. If Unit or CA/Agreement, Name and/or No.
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 17 T24S R34E NENE 330FNL 380FEL		8. Well Name and No. MADERA 17 FEDERAL 1H
		9. API Well No. 30-025-41199-00-S1
		10. Field and Pool, or Exploratory ANTELOPE RIDGE RED HILLS
		11. County or Parish, and State LEA COUNTY, NM

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Drilling Operations
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

05/31/15: THROUGH 06/01/15: DRILL 144-1310.
06/01/15: RAN 13 3/8", 48#, H-40 SURFACE CSG SET @ 1293.
06/02/15: CMT W/20 BBL SPACER, 949 SX CL C, LEAD, & 445 SX CL C TAIL. 188 BBLS CMT TO SURF.
06/03/15 THROUGH 06/06/15: TAG CMT @ 1210. DRILL 1210-5222.
06/06/15: RUN 9 5/8", 40#, HCK-55, ST&C INTERMEDIATE CSG SET @ 5207'.
06/07/15: PRESS TO 4000 PSI. PMP 20 BBLS SPACER. CMT W/1375 SX LEAD ECONOCEM HLC @ 12.9 PPG. TAIL: 310 SX HALCEM C @ 14.8 PPG. DISPL W/391 BBLS 8.4 PPG FW. BUMP PLUG W/500 PSI. FULL RETURNS. FINAL PRESS-1577 PSI @ 3 BPM. 123 BBLS CMT TO SURF. WOC.
06/07/15 THROUGH 06/19/2015: DRILL 5232-15,430. (TD - 15,430). 2,000' longer than approved.
06/21/15: RAN 5 1/2", 20#, P-110 PRODUCTION CSG SET @ 15,417'.
06/22/15: PRESS TO 6500 PSI. CMT W/20 BBLS SPACER, LEAD: 870 SX VERICEM @ 11.3 PPG, 2ND LEAD: 1235 SX VERICEM @ 13.2 PPG, TAIL: 135 SX SOLUCEM H @ 15 PPG. PUMP DISPLACEMENT CMT W/344 BBLS @ 8.4 PPG.

14. I hereby certify that the foregoing is true and correct.

Electronic Submission #307595 verified by the BLM Well Information System
For CHEVRON MIDCONTINENT LP, sent to the Hobbs
Committed to AFMSS for processing by LINDA JIMENEZ on 10/01/2015 (16LJ0014SE)

Name (Printed/Typed) DENISE PINKERTON	Title REGULATORY SPECIALIST
Signature (Electronic Submission)	Date 06/30/2015

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____	Title _____
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.	Office _____

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

**** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ****

DEC 03 2015

jm

Additional data for EC transaction #307595 that would not fit on the form

32. Additional remarks, continued

BUMP PLUG-600 PSI.TOC @ 4917. FINAL PUMP PRESS-1975 PSI @ 4 BPM.
06/23/15: RELEASE RIG.