Submit One Copy To Appropriate District	State of Nov. Maria	-	Farm C 10
Office	fice State of New Minerals and Natural Descursor		Form C-103 Revised November 3, 201
<u>District I</u> 1625 N. French Dr., Hobbs, NM 88240			PI NO.
District II	OH CONCEDIVATION DIVIGION		00
811 S. First St., Artesia, NM 88210 District III	1220 South St. Francis	D. Indica	te Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505	- 31	ATE ✓ FEE ☐  Oil & Gas Lease No.
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM	Santa 1 C, 14141 67503	6. State (	Oil & Gas Lease No.
87505			
	ICES AND REPORTS ON WELLS	7. Lease	Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPLIE	SALS TO DRILL OR TO DEEPEN OR RLOG B CATION FOR PERMIT" (FORM CTO)) FOR SL	JCH WEST VACI	JUM UNIT /
PROPOSALS.)	Gas Well Other: Injection FEB	9 2016 8. Well N	Number #013
2. Name of Operator	das weil Utiler: Injection FEB	9 OGRI	D Number
CHEVRON USA INC		CEIVED 4323	D I valifice!
3. Address of Operator	RE	9. OGRI 4323 10. Pool	name or Wildcat
15 SMITH ROAD, MIDLA			
	ND, TEXAS 79703		
4. Well Location Unit Letter A: 330	feet from the NORTH line and	feet from the	ne EAST line
Section 34		NMPM	County LEA
	11. Elevation (Show whether DR, RK)		County EEA
		.,,	
12. Check Appropriate Box to	Indicate Nature of Notice, Report	rt or Other Data	
NOTICE OF IN	ITENTION TO:	CLIDOFOLIE	IT DEPORT OF
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:  PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WORK ☐ ALTERING CASING			
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLI			
PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMENT JOB			
OTHER:			
		Location is ready for OC	
All pits have been remediated in co	ompliance with OCD rules and the terms of the		closure plan.
Rat hole and cellar have been filled and leveled. Cathodic protection holes have been properly abandoned.  A steel marker at least 4" in diameter and at least 4' above ground level has been set in concrete. It shows the following:			
OPERATOR NAME A DAGENAME WELL MINARDED ARRANGED OF A DEPARTMENT AND A DATE OF A DATE O			
OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, QUARTER/QUARTER LOCATION OR UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATION HAS BEEN WELDED OR PERMANENTLY			
STAMPED ON THE MARKER'S SURFACE.			
The location has been leveled as nearly as possible to original ground contour and has been cleared of all junk, trash, flow lines and other production equipment.			
Anchors, dead men, tie downs and risers have been cut off at least two feet below ground level.			
If this is a one-well lease or last remaining well on lease, the battery and pit location(s) have been remediated in compliance with OCD rules and the terms of the Operator's pit permit and closure plan. All flow lines, production equipment and junk have been removed from lease and well			
location.	it and closure plan. All flow lines, production	on equipment and junk have o	een removed from lease and wen
	have been removed. Portable bases have be	en removed. (Poured onsite co	oncrete bases do not have to be
removed.)  All other environmental concerns	have been addressed as per OCD rules		
	have been addressed as per OCD rules.  a abandoned in accordance with 19.15.35.10	NMAC. All fluids have been	removed from non-retrieved flow
lines and pipelines.			
If this is a one-well lease or last re- except for utility's distribution infrastruc	maining well on lease: all electrical service p	oles and lines have been remo	oved from lease and well location,
except for utility's distribution infrastruc	Aure.		
When all work has been completed, retu	rn this form to the appropriate District office	to schedule an inspection.	
rel			
SIGNATURE:	TITLE: Project	t Rep DATE:	2-25-2016
0101			
TYPE OR PRINT NAME Chris Gib	bons E-MAIL: cgibbons@ch	nevron.com PHONE	3: 985-228-0582
For State Use Only			
APPROVED . I	71.	0. 1.1.1	12 At 201
BY: Wal Whital	TITLE Petroleum En	gr. specialist DA	TE 03-01-2016
Conditions of Approval (if any):			

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