District I - (575) 393-6161 811 S. First St., Artesia, NM 88210 District III - (505) 334-6178 1000 Rio Brazos Rd Aztec: NM 87410

State of New Mexico

Form C-103 Revised July 18, 2013

1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283 Energy, Minerals and Natural Resources WELL API NO. OIL CONSERVATION DA 3002538788 District IV - (505) 476-3460 1220 South St. Fences Dr. 5. Indicate Type of Lease 1220 S. St. Francis Dr., Santa Fe, NM 87505 STATE 🖂 FEE 6. State Oil & Gas Lease No. SUNDRY NOTICES AND REPORTS ON W 7. Lease Name or Unit Agreement Name (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPER CO VACUUM GRAYBURG SAN ANDRES UNIT TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" A VAM C-101) FOR 8. Well Number SUCH PROPOSALS.) 441 1. Type of Well: Oil Well Gas Well X Other Injector 2. Name of Operator 9. OGRID Number CHEVRON MIDCONTINENT, L.P. 4323 3. Address of Operator 10. Pool name or Wildcat 6301 DEAUVILLE BLVD MIDLAND, TEXAS 79706 VACUUM: GRAYBURG SAN ANDRES 4. Well Location Unit Letter D: 170 feet from the NORTH line and 710 feet from the WEST line Section 1 Township 18 S **NMPM** County LEA Range 34E 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PLUG AND ABANDON PERFORM REMEDIAL WORK REMEDIAL WORK ALTERING CASING **TEMPORARILY ABANDON CHANGE PLANS** COMMENCE DRILLING OPNS. P AND A MULTIPLE COMPL PULL OR ALTER CASING CASING/CEMENT JOB DOWNHOLE COMMINGLE **CLOSED-LOOP SYSTEM** OTHER: OTHER: ANNUAL MIT TEST 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. CHEVRON HAS CONDUCTED THE REQUIRED MIT TEST ON THE ABOVE WELL. CHART ATTACHED. **PLEASE NOTE THIS TEST IS FOR UIC ANNUAL TESTING**

Spud Date:	Rig Release Date:	
I hereby certify that the information abo	ve is true and complete to the best of my knowledge and belief.	
SIGNATURE:	TITLE: REGULATORY ASSISTANT DATE: 51419	_
Type or print name: JESSICA JONES	E-mail address: JJZI@CHEVRON.COM PHONE: 432-687-7575	
For State Use Only		

APPROVED BY: Luy folusion Conditions of Approval (if any):

TITLE Caylean Office DATE 5-16-18

