

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

HOBBS OGD
 MAY 24 2019
 RECEIVED

WELL API NO. 30-025-25672
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name MEXICO L
8. Well Number 26
9. OGRID Number 4323
10. Pool name or Wildcat DOLLARHIDE;FUSSELMAN
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3059' GL

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.)

1. Type of Well: Oil Well Gas Well Other

2. Name of Operator
CHEVRON USA INC

3. Address of Operator
1616 W. BENDER BLVD HOBBS, NM 88240

4. Well Location
 Unit Letter D : 566 feet from the NORTH line and 860 feet from the WEST line
 Section 5 Township 25S Range 38E NMPM County LEA

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: TA STATUS/MIT CHART <input checked="" type="checkbox"/>	

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 USA INC.IS REQUESTING FOR TA STATUS ON THE ABOVE WELL.

05/22/2019 TEST CASING TO 560 PSI FOR 32 MINUTES. WITNESSED BY GARY ROBINSON/NMOCD ORIGINAL CHART AND A COPY IS ATTACHED

CURRENT TA EXPIRED 05/17/2019

Spud Date:

Rig Release

This Approval of TA EXPIRES: 11/4/19
FINAL TA STATUS EXTENSION -
 Well needs to be PLUGGED or RETURNED to PRODUCTION
 BY THE DATE STATED ABOVE: 2019

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

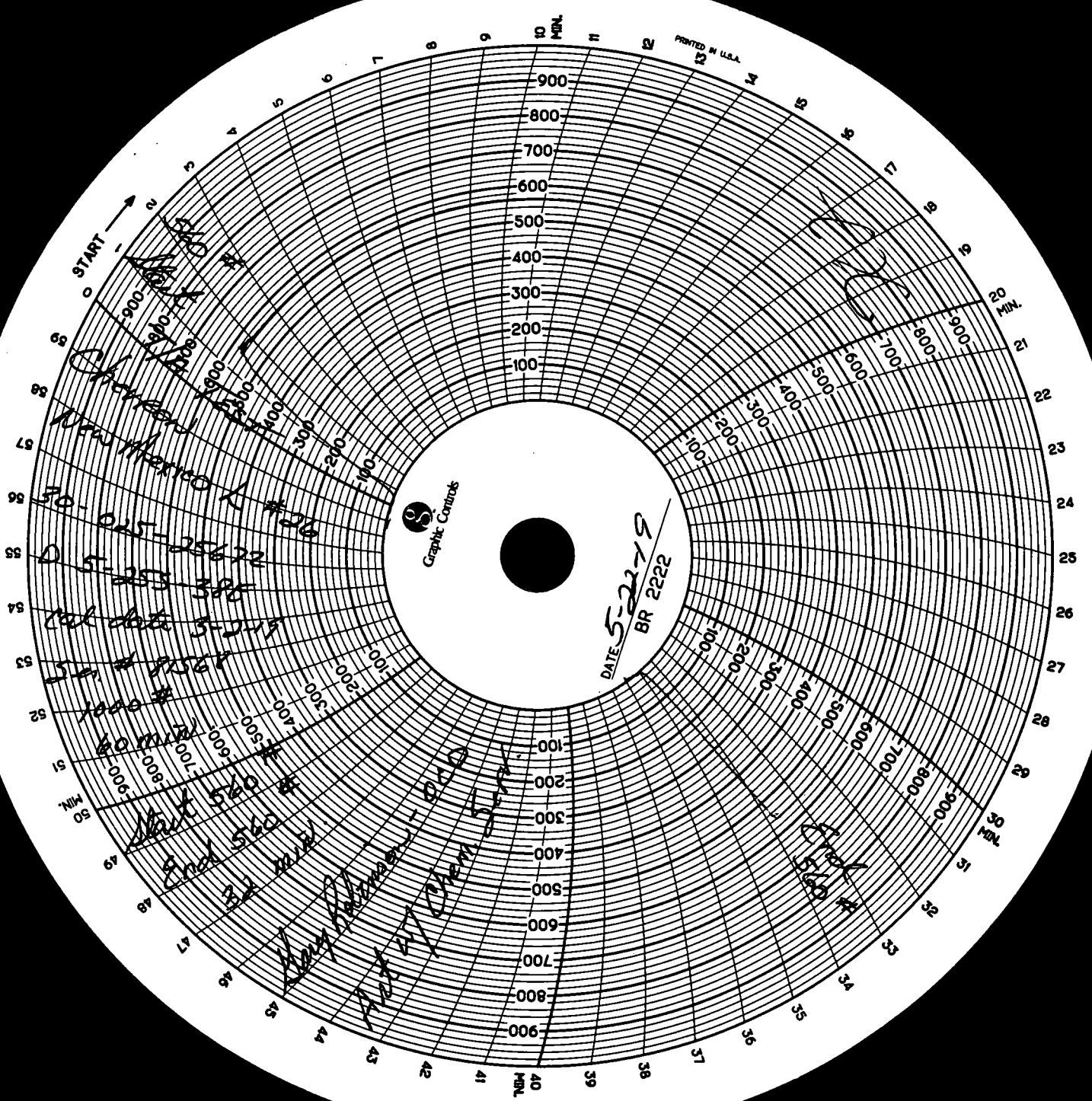
SIGNATURE Cindy Herrera-Murillo TITLE PERMITTING SPECIALIST DATE 05/23/2019

Type or print name CINDY HERRERA-MURILLO E-mail address: Cherreramurillo@chevron.com PHONE: 575-263-0431

For State Use Only

APPROVED BY: Kerry Forth TITLE Compliance Office A DATE 6-4-19
 Conditions of Approval (if any):

PRINTED IN U.S.A.





 Graphic Controls

DATE 5-22-79
 BR 2222

START →

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PER MIN.

State of New Mexico
 Energy, Minerals and Natural Resources Department
 Oil Conservation Division Hobbs District Office

BRADENHEAD TEST REPORT

Operator Name <i>Cherron</i>		API Number <i>30-025-25672</i>
Property Name <i>New Mexico L</i>		Well No. <i>#26</i>

1. Surface Location

UL - Lot	Section	Township	Range	Feet from	N/S Line	Feet From	E/W Line	County
<i>D</i>	<i>5</i>	<i>25S</i>	<i>38E</i>	<i>566</i>	<i>N</i>	<i>860</i>	<i>W</i>	<i>LEA</i>

Well Status

TA'D WELL <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	SHUT-IN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	INJECTOR <input type="checkbox"/> INJ <input type="checkbox"/> SWD	PRODUCER <input checked="" type="checkbox"/> OIL <input type="checkbox"/> GAS	DATE <i>5-22-19</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>N/A</i>	<i>N/A</i>	<i>N/A</i>	<i>0</i>	<i>NONE</i>
Flow Characteristics					
Pull	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	CO2 <input type="checkbox"/>
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	WTR <input type="checkbox"/>
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	GAS <input type="checkbox"/>
Down to nothing	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Type of fluid Injected for analysis if applies
Gas or Oil	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Water	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	

Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

Signature:	OIL CONSERVATION DIVISION
Printed name:	Entered into RBDMS
Title:	Re-test
E-mail Address:	<i>XJ</i>
Date:	Phone:
Witness: <i>Gary Robinson</i>	

