 (DO NOT USE THIS FORM FOR PROPODIFFERENT RESERVOIR. USE "APPLIC PROPOSALS.) 1. Type of Well: Oil Well 2. Name of Operator Chevron USA INC 3. Address of Operator 	CES AND REPORTS ON WELLS SALS TO DRILL OR TO DEEPEN OR PLU CATION FOR PERMIT" (FORM C-101) FO Gas Well Other	ral Resources DIVISION Icis Dr. OCD OBBS OCD MAY 21 2019	 7. Lease Name or Uni McCloy Ranch 2 24 32 8. Well Number 004H 9. OGRID Number: 4 10. Pool name or Wild 	FEE
6301 Deauville Blvd, Midland, TX 79706 4. Well Location			Triste Draw; Bone Spring (96603)	
	0feet from theSouth	line and	600feet from t	he <u>East</u> line
Section 2	Township 24S	Range 32E	NMPM	Lea County
	11. Elevation (Show whether DR, 3606'	RKB, RT, GR, etc.)		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK ⊠ PLUG AND ABANDON				
Spud Date:	Rig Release Da	ate:		
I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE				
For State Use Only				
APPROVED BY: Conditions of Approval (if any):	TITLE Pe	troleum Enginee	DATE	07422/19