

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

WELL API NO. 30-025-03826
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 LOVINGTON PADDOCK UNIT
8. Well Number #59
9. OGRID Number 4323
10. Pool name or Wildcat VACUUM ABO NORTH
11. Elevation (Show whether DR, RKB, RT, GR, etc.)

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 INJECTION ☐

2. Name of Operator  
CHEVRON MIDCONTINENT LP

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

4. Well Location  
Unit Letter G : 2080 feet from the NORTH line and 1980 feet from the EAST line  
Section 01 Township 17S Range 36E NMPM County LEA

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:	
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: ANNUAL MIT TEST <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 HAS CONDUCTED THE ANNUAL MIT TEST ON THE ABOVE WELL.  
CHART ATTACHED

\*\*\* NOTE THIS TEST IS FOR UIC ANNUAL TESTING\*\*\*

Spud Date:

Rig Release Date:

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 06/01/2020

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

APPROVED BY: Kenny Int TITLE C O A DATE 6-16-20  
Conditions of Approval (if any)

96 MIN

START

8 MIN

16 MIN

24 MIN

32 MIN

40 MIN

56 MIN

64 MIN

72 MIN

80 MIN

88 MIN

PRINTED IN U.S.A.

Graphic Controls LLC  
(6.375 ARC LINE GRAD.)

LP4 59

DATE 4/15/20  
MCI P 0-1000-8-96MIN

RECEIVED  
UNIT 8 2020  
HOBBS OCS

Handwritten notes on the chart grid, including:  
- "LP4 59" (repeated)  
- "4-15-20" (repeated)  
- "MCI P 0-1000-8-96MIN" (repeated)  
- "UNIT 8 2020" (repeated)  
- "HOBBS OCS" (repeated)  
- "RECEIVED" (repeated)  
- "4-15-20" (repeated)  
- "MCI P 0-1000-8-96MIN" (repeated)  
- "UNIT 8 2020" (repeated)  
- "HOBBS OCS" (repeated)  
- "RECEIVED" (repeated)