UNITED STATES DEPARTMENT OF THE INTERIOR

MOBBSOCD							
(August 2007) AN 1 DEF	UNITED STATE ARTMENT OF THE EAU OF LAND MAN	INTERIOR	10 19	is of	5. Lease Serial No	DRM APPROVED MB No. 1004-0137 pires July 31, 2010	
REPNDRY N Do not use this f	OTICES AND REPO orm for proposals Use Form 3160-3 (A	ORTS ON WE	ELLS re-enter an	RECE	NMNM98122	Tribe Name	
SUBMIT IN TRIPLICATE – Other instructions on page 2. 1 Type of Well					7. If Unit of CA/Agreement Name and/or No NMNM71030X		
Oil Well Gas Well Other				8 Well Name and No Skelly Unit 715			
2 Name of Operator CHEVRON USA INCORPORATED COG Operating LLC (Agent)					9 API Well No 30-015-38346		
3a Address (Agent) 550 W Texas Avel, Suite 100 Midland, TX 797	e , Suite 100 Midland, TX 79701 432-818-2319			include area code) 10. Field and Pool or Explorator MAR LOCO, GLORIETA-YES		·	
4 Location of Well (Footage, Sec., T.R.M., or Survey Description) Sec 21 T17S R31E 1650 FSL 330 FEL, Unit I					11 Country or Parish, State EDDY COUNTY, NM		
12 CHEC	K THE APPROPRIATE B	OX(ES) TO INDIC	CATE NATURE	OF NOTI	CE, REPORT OR OTHE	ER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION						
Notice of Intent	Acidize Alter Casing Casing Repair	p	e Treat	Rec	duction (Start/Resume) lamation omplete	Water Shot-Off Well Integrity ✓ Other	
✓ Subsequent Report Final Abandonment Notice	Change Plans Convert to Injection	,	d Abandon	Тен	ompiere oporarily Abandon ter Disposal	Drilling Operations	
Attach the Bond under which the violations of the involvesting has been completed. Final determined that the site is ready for the following completed. Final determined that the site is ready for the following of the following	ed operations. If the operations Abandonment Notices must final inspection.) 70 - 6670 w/1 SPF, 26 hot HCL. Frac w/143,850 ga i SiberProp. Set CBP @ 600 - 6400 w/1 SPF, 26 hot sand, 28,380# 16/30 SiberPr 80 w/1 SPF, 20 holes. Acut to PBTD 6807.	tion results in a multiple filed only after less list gel, 143,080# 6440. Hes. Acidized w/3erProp. Set CBP less Acidized w/3op. Set CBP @ 5cidized w/3000 gallocated w/3000 ga	Itiple completion all requirements 16/30 3500 gals 15% @ 5770 500 gals 15% H 210 als 15% HCL F	n or recom s, including HCL Frac	pletion in a new interval g reclamation, have been not be	, a Form 3160 4 must be filed once	
14. I hereby certify that the foregoing is true and correct. Name (Printed Typed) Netha Aaron.			Title PREPAR	lER			
Signature							
	THIS SPACE	FOR FEDER	RAL OR ST	ATE OF	FICE USE		
Approved by			Title			Date	
Conditions of approval, if any, are attache that the applicant holds legal or equitable entitle the applicant to conduct operations	title to those rights in the subj		rtify				