

RECEIVED

FEB 14 2011  
HOBBSD

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

WELL API NO.

30-01526036

5. Indicate Type of Lease

STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name  
PARDUE FARMS 27

8. Well Number 7

9. OGRID Number 241333

10. Pool name or Wildcat  
E. LOVING; BRUSHY CANYON

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 MIDCONTINENT, L.P.

3. Address of Operator  
15 SMITH ROAD, MIDLAND, TEXAS 79705

4. Well Location

Unit Letter A 560 feet from the NORTH line and 560 feet from the EAST line

Section 27 Township 23-S Range 28-E 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:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐  
DOWNHOLE COMMINGLE ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐

OTHER:

OTHER: EXTEND TA STATUS W/CHART

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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

01-20-2011: RAN MIT CHART FOR NMOCD TO EXTEND TA STATUS WHICH IS SCHEDULED TO EXPIRE.  
TEST CSG TO 520 PSI FOR 30 MINUTES. GOOD. (ORIGINAL CHART & COPY OF CHART ATTACHED).

CIBP SET @ 6000'  
PERFS: 6040-7027'

PLEASE EXTEND TA STATUS FOR THIS WELL

DENIED. OGD NOT NOTIFIED OF TEST.  
CONTACT THE OGD TO ARRANGE A  
TEST THAT CAN BE WITNESSED.

RE-NMOCD  
3/15/11

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

*Denise Pinkerton*

TITLE REGULATORY SPECIALIST

DATE 02-10-2011

Type or print name  
For State Use Only

DENISE PINKERTON

E-mail address: [leakejd@chevron.com](mailto:leakejd@chevron.com)

PHONE: 432-687-7375

APPROVED BY:

TITLE

DATE

Conditions of Approval (if any):



