

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

Rec'd 05/29/2020 - NMOCD

Form C-103  
Revised July 18, 2013

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

WELL API NO. <b>30-015-45711</b>
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name <b>CB NE 15 22 002</b>
8. Well Number <b>3H</b>
9. OGRID Number <b>4323</b>
10. Pool name or Wildcat <b>PURPLE SAGE;WOLFCAMP (GAS)</b>

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 <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other	
2. Name of Operator <b>CHEVRON USA INC</b>	
3. Address of Operator <b>6301 DEAUVILLE BLVD., MIDLAND, TX 79706</b>	
4. Well Location Unit Letter <b>A</b> : <b>520</b> feet from the <b>NORTH</b> line and <b>1305</b> feet from the <b>EAST</b> line Section <b>15</b> Township <b>23S</b> Range <b>28E</b> NMPM County <b>EDDY</b>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>2992' RKB</b>	

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: <b>HYDRAULIC FRAC</b>	<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.

1/16/20 – Ran CBL from 9,899' to surface. TOC ~1,000'.

1/19/20 - Test prod csg 9,800 psi for 30 min and RU frac equipment.

1/20/2020-2/14/20 - Perforate & frac from 9,800'-19,626'. Frac w/1.1 MM bbls fluid & 24.7 MM# proppant. RD frac equipment.

3/27/20 – BOPE test to 250 psi low/3,800 psi high for 10 min.

3/28/20-3/30/20 – Drill out plugs and wash perfs.

3/22/20 – Set packer @ 9,396'. Test packer, good test.

4/1/20 – Ran 2-7/8" L-80 prod tubing and set @ 9,418, PBTD: 19,694'. RD

4/6/20 – Pressure test tubing to 1000 psi for 15 min and csg to 1000 psi for 15 min, all tests good. RD and shut in well.

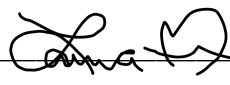
Spud Date:

8/7/2019

Rig Release Date:

10/4/2019

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

SIGNATURE  TITLE Permitting Specialist DATE 5/29/2020

Type or print name Laura Becerra E-mail address: LBecerra@Chevron.com PHONE: (432) 687-7665

**For State Use Only**

APPROVED BY:  TITLE Staff Mgr DATE 6/2/2020

Conditions of Approval (if any):