

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD Artesia

FORM APPROVED
OMB NO. 1004-0135
Expires: July 31, 2010

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.

5. Lease Serial No.
NMNM111530

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

1. Type of Well
☒ Oil Well ☐ Gas Well ☐ Other

8. Well Name and No.
HAYHURST 18 FEDERAL 1H

2. Name of Operator
CHEVRON USA INCORPORATED Contact: DENISE PINKERTON
E-Mail: leakejd@chevron.com

9. API Well No.
30-015-41848-00-X1

3a. Address
15 SMITH ROAD
MIDLAND, TX 79705

3b. Phone No. (include area code)
Ph: 432-687-7375

10. Field and Pool, or Exploratory
COTTONWOOD DRAW

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Sec 18 T25S R27E NENE 340FNL 1040FEL
32.136450 N Lat, 104.223771 W Lon

11. County or Parish, and State

EDDY COUNTY, NM

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Change to Original A
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	PD

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

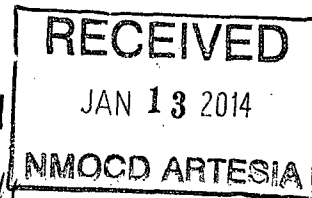
CHEVRON U.S.A. INC. RESPECTFULLY REQUESTS THE USE OF A COFLEX HOSE BETWEEN THE BOP AND THE CHOKE MANIFOLD.

PLEASE FIND ATTACHMENTS.

*4 Variance for
per operator 1/9/13*

SEE ATTACHED FOR
CONDITIONS OF APPROVAL

Accepted for record
NMOCD 106
1-13-2014



14. I hereby certify that the foregoing is true and correct.

Electronic Submission #229373 verified by the BLM Well Information System

For CHEVRON USA INCORPORATED, sent to the Carlsbad

Committed to AFMS for processing by WESLEY INGRAM on 01/09/2014 (14WWI0246SE)

Name (Printed/Typed) DENISE PINKERTON

Title REGULATORY SPECIALIST

Signature (Electronic Submission)

Date 12/12/2013

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By

Title

Date

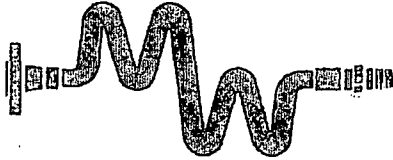
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease, which would entitle the applicant to conduct operations thereon.

Office

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

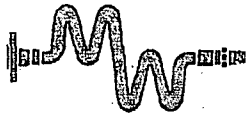
BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE

** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED **



Midwest Hose
& Specialty, Inc.

INTERNAL HYDROSTATIC TEST CERTIFICATE			
Customer:		Customer P.O. Number:	
ODESSA		193072	
HOSE SPECIFICATIONS			
Type: Rotary/CHOKE KILL GRADE E / API 7K		Hose Length: 25' FEET	
I.D. 3" INCHES		O.D. 4.77 INCHES	
WORKING PRESSURE	TEST PRESSURE	BURST PRESSURE	
10,000 PSI	15,000 PSI	N/A PSI	
COUPLINGS			
Part Number E3.0X64WB E3.0X64WB	Stem Lot Number	Ferrule Lot Number L08301765 L08301765	
Type of Coupling: SWAGE-IT		Die Size: 5.25	
PROCEDURE			
<u>Hose assembly pressure tested with water at ambient temperature.</u>			
TIME HELD AT TEST PRESSURE		ACTUAL BURST PRESSURE:	
3 1/2 MIN.		N/A PSI	
Hose Assembly Serial Number: 212332		Hose Serial Number: 8104	
Comments:			
Date:	Tested:	Approved:	
8/7/2013			



Midwest Hose
& Specialty, Inc.

Internal Hydrostatic Test Graph

August 7, 2013

Customer: Odessa

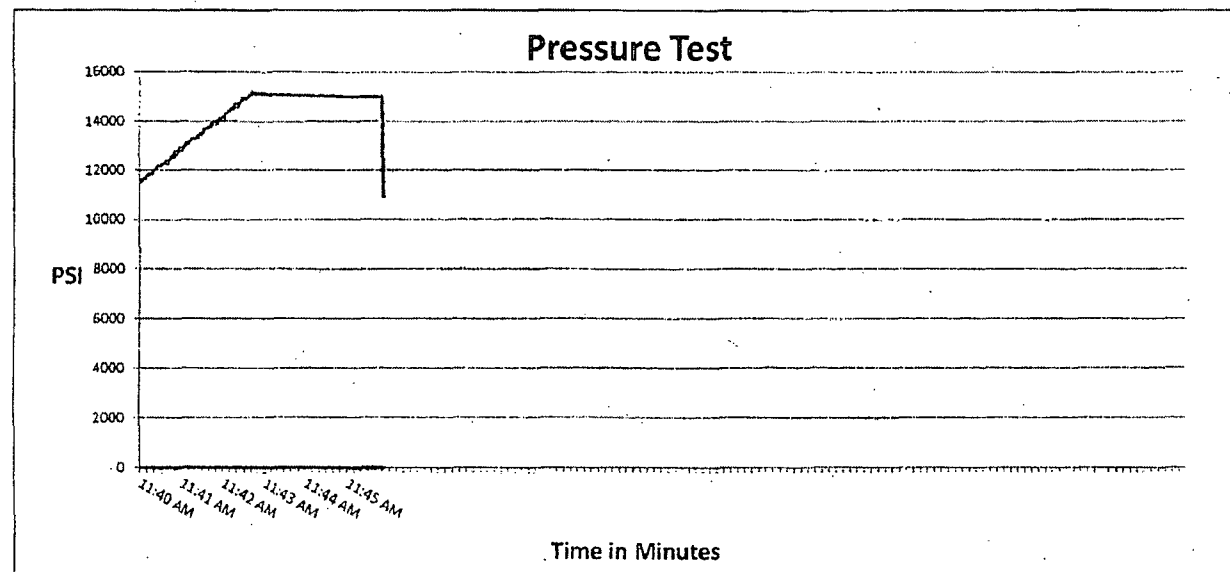
Pick Ticket #: 212332

Hose Specifications

<u>Hose Type</u>	<u>Length</u>
E	25'
<u>I.D.</u>	<u>O.D.</u>
3"	4.77"
<u>Working Pressure</u>	<u>Burst Pressure</u>
7500 PSI	Standard Safety Multiplier Applies

Verification

<u>Type of Fitting</u>	<u>Coupling Method</u>
4 1/16 10K	Swage
<u>Die Size</u>	<u>Final O.D.</u>
5.25"	5.31"
<u>Hose Serial #</u>	<u>Hose Assembly Serial #</u>
8104	212332



Test Pressure
15000 PSI

Time Held at Test Pressure
3 2/4 Minutes

Actual Burst Pressure

Peak Pressure
15263 PSI

Comments: Hose assembly pressure tested with water at ambient temperature.

Tested By: Ryan Malone

Approved By: Ryan Adams

x _____

x 

Co-Flex line
Conditions of Approval

Variance approved to use flex line from BOP to choke manifold. Check condition of flexible line from BOP to choke manifold, replace if exterior is damaged or if line fails test. Line to be as straight as possible with no hard bends and is to be anchored according to Manufacturer's requirements. The flexible hose can be exchanged with a hose of equal size and equal or greater pressure rating. **Anchor requirements, specification sheet and hydrostatic pressure test certification matching the hose in service, to be onsite for review.** If the BLM inspector questions the straightness of the hose, a BLM engineer will be contacted and will review in the field or via picture supplied by inspector to determine if changes are required (operator shall expect delays if this occurs).