

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. 30-015-43892
5. Indicate Type of Lease STATE X FEE
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Gravitas 2 State SWD (316753)
8. Well Number 002
9. OGRID Number 4323
10. Pool name or Wildcat SWD; Devonian - Silurian (97869)

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 10) FOR SUCH PROPOSALS.)

ARTESIA DISTRICT
 OCT 25 2016
 RECEIVED

1. Type of Well: Oil Well Gas Well Other SWD

2. Name of Operator CHEVRON U.S.A. INC.

3. Address of Operator 6301 Deauville Blvd., MIDLAND, TX 79706

4. Well Location
 Unit Letter: N 400 feet from the South line and 1560 feet from the West line
 Section 2 Township 26S Range 27E 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	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:		OTHER:	

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 respectfully requests to make changes to the SHL on the original permit. Please refer to the certified C-102 along with the vicinity maps.
 Please contact Dorian 432.687.7631 or djvo@chevron.com.

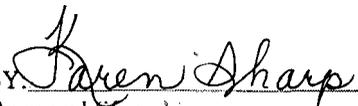
change to: 737 FSL/1078 FWL

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  TITLE: REGULATORY SPECIALIST DATE: 10/24/2016
 Type or print name: DORIAN K. FUENTES E-mail address: DJVO@CHEVRON.COM PHONE: 432-687-7631

For State Use Only

APPROVED BY:  TITLE: *Bus Oper Spec - Adv* DATE: *10/25/16*
 Conditions of Approval (if any):