Form 3160-5 (February 2005)

## UNITED STATES DEPARTMENT OF THE INTERIOR

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| FORM APPROVED          |
|------------------------|
| OM B No. 1004-0137     |
| Expires: March 31, 200 |

| (February 2005)  DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT   |   |                      |  | OM B No. 1004-0137<br>Expires: March 31, 2007 |                      |  |  |
|---|---|----------------------|--|---|----------------------|--|--|
|   |   |                      |  | 5. Lease Seria                                |                      |  |  |
|   | NOTICES AND REP is form for proposals to  |                      |  | 6. If Indian.                                 | Allottee or Tribe N  | Name AUG 2006                                |  |
| abandoned we  | il. Use Form 3160-3 (A  | (APD) for such       | proposals. 12                                      | ΦĜ  |                      | F. C. S. |  |
|   | PLICATE- Other instr  |                      |  |   | CA/Agreement, N      | ame and/or No.                               |  |
| 1. Type of Well Oil Well  | Gas Well Other  | 0 î 6 î              | ARMINGTON :  | Rincon<br>8. Well Nar                         | 13                   |  |  |
| 2. Name of Operator Chevron Mid   | continent, L.P. (241333)  | _                    |  | Rincon<br>9. API We                           | Unit # 184           |  |  |
| 3a. Address       3b. Phone No.         15 Smith Road Midland, Texas 79705       432-687-7  |   |                      | lude area code)                                    | 30-039-                                       |                      | ory Area                                     |  |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  |   |                      |  |   | akota (71599)        |  |  |
| 1022' FNL & 890' FEL, UL A, Sec. 15, T27N, R07W   |   |                      | 11. Cou  |   | nty or Parish, State |  |  |
|   |   |                      |  | Rio Arr                                       | riba, New Mexic      | 0  |  |
| 12. CHECK AF  | PROPRIATE BOX(ES) TO  | INDICATE NAT         | TURE OF NOTICE, I                                  | REPORT, OR                                    | OTHER DAT            | A  |  |
| TYPE OF SUBMISSION  |   | ,                    | TYPE OF ACTION                                     |   |                      |  |  |
|   | Acidize   | Deepen               | Production (S                                      | tart/Resume)                                  | Water Shut-C         |  |  |
| ✓ Notice of Intent  | Alter Casing  | Fracture Treat       | Reclamation  |   | Well Integrit        | •  |  |
| Subsequent Report   | Casing Repair Change Plans  | New Construction     |  | handon  |                      | rade Plunger Controller                      |  |
| Final Abandonment Notice  | Final Abandonment Notice  |                      |  |   |                      |  |  |
| new modern controller wi  | P. proposes to replace the out<br>Il react to line pressures result<br>ooting along with developmen | ting in increased ru | un times and uplift of p                           | roduction in tl                               | his well. Remote     | electronic                                   |  |
| from this plunger int cont  | toner upgrade.  |                      |  |   |                      |  |  |
|   |   |                      |  |   |                      |  |  |
|   |   |                      |  |   |                      |  |  |
| •   |   |                      |  |   |                      |  |  |
|   |   |                      |  |   |                      |  |  |
|   |   |                      |  |   |                      |  |  |
|   |   |                      |  |   |                      |  |  |
| 14. I hereby certify that the fore Name (Printed/Typed)   | going is true and correct   | 1                    |  | ***   |                      |  |  |
| Alan W. Bohling   |   | Titl                 | e Regulatory Agent                                 |   |                      | ·  |  |
| Signature Alank.  | Colling   | Da                   | te   | 08/14/2006                                    |                      | _  |  |
|   | THIS SPACE FOR  | FEDERAL O            | R STATE OFFIC                                      | E USE   | ACCEP                | TED FOR RECORD                               |  |
| Approved by   |   |                      | Title  |   | Date Al              | JG 2 5 2006                                  |  |
| Conditions of approval, if any, are attached. Approval of this notice does not warran certify that the applicant holds legal or equitable title to those rights in the subject lea which would entitle the applicant to conduct operations thereon. |   |                      | Office   |   |                      | GTON FIELD OFFICE                            |  |
| Title 18 U.S.C. Section 1001 and Titl<br>States any false, fictitious or fraudu   | le 43 U.S.C. Section 1212, make it  | a crime for any pers | on knowingly and willfull<br>hin its jurisdiction. | y to make to an                               |                      | gency of the United                          |  |

(Instructions on page 2)

