

DISTRICT I

P.O. Box 1980, Hobbs, NM 88240

DISTRICT II

P.O. Box Drawer DD, Artesia, NM 88210

DISTRICT III

1000 Rio Brazos Rd., Aztec, NM 87410

**OIL CONSERVATION DIVISION**

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

WELL API NO.	30-025-12311
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil / Gas Lease No.	B-9311
7. Lease Name or Unit Agreement Name	MEXICO 'J'
8. Well No.	17
9. Pool Name or Wildcat	DOLLARHIDE FUSSELMAN
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMI (FORM C-101) FOR SUCH PROPOSALS.	
1. Type of Well:	OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator	CHEVRON USA INC
3. Address of Operator	15 SMITH RD, MIDLAND, TX 79705
4. Well Location	Unit Letter <u>N</u> : <u>660</u> Feet From The <u>SOUTH</u> Line and <u>2130</u> Feet From The <u>WEST</u> Line Section <u>32</u> Township <u>24S</u> Range <u>38E</u> NMPM <u>LEA</u> COUNTY
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	

11.

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 ☐  
OTHER: ☐

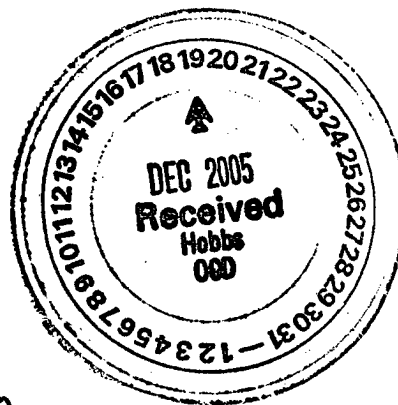
**SUBSEQUENT REPORT OF:**

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPERATION ☐ PLUG AND ABANDONMENT ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER: ☐ CHART FOR TA ☒

12. 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.

11-29-05: MIT CHART FOR NMOC. TEST CSG TO 570# FOR 30 MIN. GOOD.  
(ORIGINAL CHART & COPY OF CHART ATTACHED).

WELL IS TEMPORARILY ABANDONED.



This Approval of Temporary 11/29/10  
Abandonment Expires

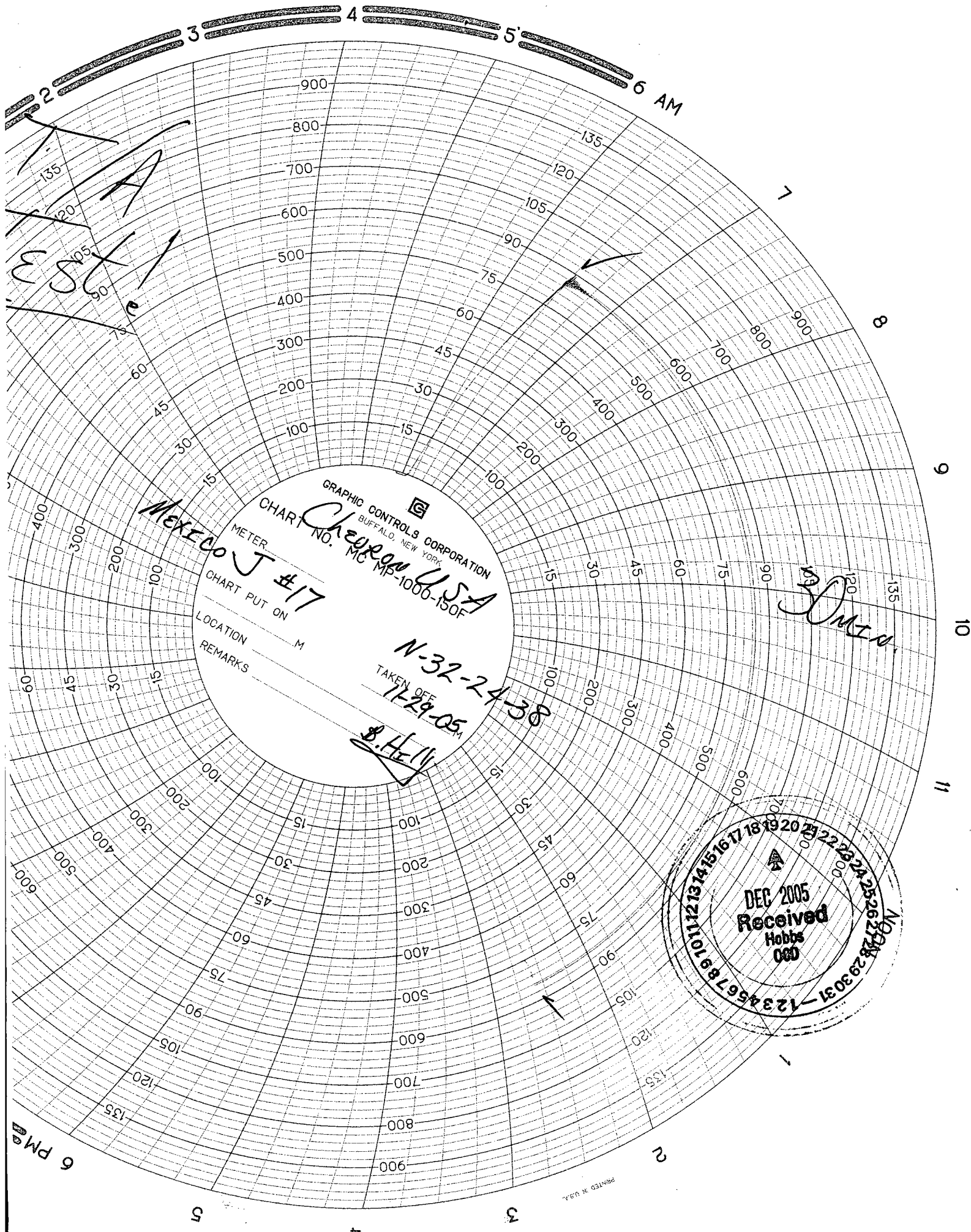
I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Denise Pinkerton TITLE Regulatory Specialist DATE 12/15/2005  
TYPE OR PRINT NAME Denise Pinkerton Telephone No. 432-687-7375

(This space for State Use)

APPROVED Larry W. Wink OC FIELD REPRESENTATIVE II/STAFF MANAGER  
CONDITIONS OF APPROVAL IF ANY: TITLE DATE

DEC 20 2005



GRAPHIC CONTROLS CORPORATION  
BUFFALO, NEW YORK  
CHART NO. MC MP-1000-150F  
METER *Chevron USA*  
CHART PUT ON *J #17*  
LOCATION \_\_\_\_\_  
REMARKS \_\_\_\_\_  
TAKEN OFF *N-32-2438*  
*12-29-05*  
*B.H. (11)*

DEC 2005  
Received  
Hobbs  
OGD  
12345678910111213141516171819202122232425262728293031