

Submit One Copy To Appropriate District Office	State of New Me		Form C-103
District 1	Energy, Minerals and Natu	ral Resources	Revised November 3, 2011 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 District II		30-025-31930	
811 S. First St., Artesia, NM 88210 District III	OIL CONSERVATION		5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Fran		STATE STEE
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM	Santa Fe, NM 87	2005	6. State Oil & Gas Lease No.
87505			
	ES AND REPORTS ON WELLS		7. Lease Name or Unit Agreement Name
(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			NEW MEXICO 'R' STATE NCT-3
PROPOSALS.) 1. Type of Well: ⊠Oil Well ☐ Gas Well ☐ Other: INJECTION OCD			8. Well Number 25
1. Type of Well: ⊠Oil Well ☐ G 2. Name of Operator	HOBBE	OCD	9. OGRID Number
CHEVRON USA INC.	HODE		4323
3. Address of Operator	9706 AUG 1	<u>4.5013</u>	10. Pool name or Wildcat
6301 Deauville Blvd., Midland, TX 7	9706 AUG =	_	VACUUM DRINKARD
4. Well Location:			
Unit Letter I : 1980 feet from the SOUTRE me and 660 feet from the EAST line			
Section I Township <u>18-S</u> Range <u>34-E</u> NMPM County <u>LEA</u>			
	11. Elevation (Show whether DR, 3,984' GL	RKB, RT, GR, etc.)	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:			
	PLUG AND ABANDON	REMEDIAL WORK	<u> </u>
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐ COMMENCE DRILLING OPNS.☐ P AND A ☐			
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT	JOB 🗆
OTHER:	П	⊠ Location is re	ady for OCD inspection after P&A
All pits have been remediated in compliance with OCD rules and the terms of the Operator's pit permit and closure plan.			
Rat hole and cellar have been filled and leveled. Cathodic protection holes have been properly abandoned.			
A steel marker at least 4" in diameter and at least 4' above ground level has been set in concrete. It shows the			
OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, QUARTER/QUARTER LOCATION OR			
UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATION HAS BEEN WELDED OR			
PERMANENTLY STAMPED ON THE MARKER'S SURFACE.			
☐ The location has been leveled as nearly as possible to original ground contour and has been cleared of all junk, trash, flow lines and other production equipment.			
Anchors, dead men, tie downs and risers have been cut off at least two feet below ground level.			
If this is a one-well lease or last remaining well on lease, the battery and pit location(s) have been remediated in compliance with			
OCD rules and the terms of the Operator's pit permit and closure plan. All flow lines, production equipment and junk have been removed			
from lease and well location. All metal bolts and other materials have been removed. Portable bases have been removed. (Poured onsite concrete bases do not have			
to be removed.)			
All other environmental concerns have been addressed as per OCD rules.			
Pipelines and flow lines have been abandoned in accordance with 19.15.35.10 NMAC. All fluids have been removed from non-			
retrieved flow lines and pipelines. If this is a one-well lease or last remaining well on lease: all electrical service poles and lines have been removed from lease and well			
location, except for utility's distribution infrastructure.			
When all work has been completed, return this form to the appropriate District office to schedule an inspection.			
SIGNATURE <u>Katherine Papageorge</u> TITLE Decommissioning Project Manager DATE 7.23.19			
SIGNATURE <u>ATTRICING Pap</u>	ageorgeTITLE	Decommissioning I	roject ManagerDATE7.23.19
TYPE OR PRINT NAMEKatherine Papageorge _ E-MAIL: _Katherine.Papageorge@chevron.com PHONE:832-854-5291			
APPROVED BY: CICK RICKAN TITLE A/O 1 DATE 8-16-19			
APPROVED BY: K	KILKMAN TITLE	4101	DATE 2 -16-1.5