| Submit 1 Copy To Appropriate District | State of New Mexico | | | Form C-103 | | |
|---|---------------------------------------|------------|----------------------|------------------------------|----------------------------------|----------|
| Office <u>District I</u> – (575) 393-6161 | Employ Minorala and Natural Dagayraaa | | | Revised August 1, 2011 | | |
| 1625 N. French Dr., Hobbs, NM 88240 | | | | WELL API NO. 30-025-25999 | | |
| <u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210 | OIL CONSERVATION DIVISION | | | 5. Indicate Type of Lease | | |
| <u>District III</u> – (505) 334-6178 | 1220 South St. Francis Dr. | | | STATE STEE | | |
| 1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> – (505) 476-3460 | Santa Fe, NM 87505 | | | 6. State Oil & Gas Lease No. | | * |
| 1220 S. St. Francis Dr., Santa Fe, NM 87505 | | | | | | |
| SUNDRY NOTICES 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 PROPOSALS.) | | | | Central Vacuum Unit | | |
| 1. Type of Well: Oil Well Gas Well Other Injection | | | | 8. Well Number: 138 | | |
| 2. Name of Operator | Gas Well Other Sinjection OCO | | | 9. OGRID Number | | |
| Chevron USA, Inc. | | WE! | | 4323 | - :: 11/11 4 4 | |
| 3. Address of Operator 6301 Deauville Blvd., Midland | TX 79706 | b ~ | ~ 4 201g | 10. Pool name | or wildcat rayburg -San Andre | ·s |
| 4. Well Location | | TEC | 5/1. | , 4044 | <u> </u> | |
| 4. Well Location Unit Letter P: 10 feet from the SOUTH line and 70 feet from the EAST ine Section 36 Township 17S Pance 34F, NMPM, County Lea | | | | | | |
| Section 36 Township 17S Range 34E, 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 IN | ITENTION TO: | | SUBS | SEQUENT R | EPORT OF | ALm |
| NOTICE OF INTENTION TO: SUBS | | | | | ALTERING CAS | ING □ |
| TEMPORARILY ABANDON | | | | _ | P AND A | |
| PULL OR ALTER CASING | | | CASING/CEMENT | | | PNR |
| DOWNHOLE COMMINGLE | | _ | 1 | _ | | |
| 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.13 3/8" @ 362' TOC Surface; 9 5/8" @ 1450' TOC Surface; 7" @ 2762' TOC | | | | | | |
| Surface; 4 1/2" @ 4800' TOC Surface; CIBP @ 4192' with 20' cement. | | | | | | |
| | | | | | | |
| Chevron USA Inc completed abandonment of this well as follows: | | | | | | |
| 00/10/10 MIDLE OTHER - 1/1/201 M/D 00 DDI CAME CO. 1/20 OVE CL C. 1/20 VED 1/1/0 DDC D/ /1/201 T/ 2/0/2 | | | | | | |
| 09/12/19: MIRU CTU. Tag at 4172'. M/P 28 BBLS MLF. Spot 35 SKS Class C, 1.32 YLD 14.8 PPG, F/ 4172' T/ 3695'. | | | | | | |
| 09/13/19: Performed bubble test on surface and intermediate casing – passed. Pressure tested casing t/ 1000 psi successfully. Perforate at 412'. Attempted to circulate through perfs at 412', per Kerry Fortner (NMOCD). Tag TOC at 3610'. Spot 25 | | | | | | |
| SKS Class C, 1.32 YLD 14.8 PPG, F/3510' T/3169'. Spot 35 SKS Class C, 1.32 YLD 14.8 PPG, F/2980' T/2503'. Spot 60 | | | | | | |
| SKS Class C, 1.32 YLD 14.8 PPG, F/ 1614' T/ 816'. Spot 40 SKS Class C, 1.32 YLD 14.8 PPG, F/ 462' T/ Surface. Attempt | | | | | | |
| to down squeeze – pressure of 500 PSI and held. RDMO. | | | | | | |
| • • | | | | | | |
| I hereby certify that the inform | ation above is true and | comple | ete to the best of r | my knowledge | and belief. | |
| | 1 | 9/17 | 7/10 | | | |
| | / / | 9/1/ | 7/19 | | | |
| X Y Z | | | | | | |
| Howie Lucas Well Abandonment | Engineer | | | | | |
| SIGNATURE | _ | E-mail | address: Howie.luca | as @chevron.com | PHONE: _432-68 | 87-7716_ |
| For State Use Only | | | | | | |
| APPROVED BY: | Journe TITLE | <u> </u> | · 1+ | D | ATE 7 - 27 | |
| Conditions of Approval (if any): | • | | | | | |