

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

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-103
Revised July 18, 2013

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR ADD BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		WELL API NO. 30-025- 03108
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other: <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator: Chevron U.S.A. Inc.		6. State Oil & Gas Lease No.
3. Address of Operator: 6301 Deauville Blvd, Midland, TX. 79706		7. Lease Name or Unit Agreement Name: Hobbs N State
4. Well Location Unit Letter <u>D</u> : <u>330</u> feet from the <u>North</u> line and <u>358</u> feet from the <u>West</u> line Section <u>8</u> Township <u>18-S</u> Range <u>35-E</u> NMPM County <u>Lea</u>		8. Well Number: 1
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. OGRID Number: 4323
		10. Pool name or Wildcat: Vacuum Blinbry

12. 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 ☐ MULTIPLE COMPL ☐
DOWNHOLE COMMINGLE ☐
CLOSED-LOOP SYSTEM ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐
OTHER: TA STATUS W/CHART ☒

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.

04/22/2020 Test casing to 530 PSI for 32 Minutes, Not witnessed by NMOC due to COVID 19. Please find attached a copy of MIT Chart and Bradenhead test.

Current TA expires on 5/11/2020.

FINAL TA STATUS- EXTENSION

Approval of TA EXPIRES: 4-13-21
Well needs to be PLUGGED OR RETURNED
to PRODUCTION
BY THE DATE STATED ABOVE: X 7

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

Cindy Herrera-Murillo

TITLE

Permitting Specialist

DATE

04/22/2020

Type or print name Cindy Herrera-Murillo

E-mail address: Cherreramurillo@chevron.com PHONE: 575-263-0431

For State Use Only

APPROVED BY:

Kenny Fortner

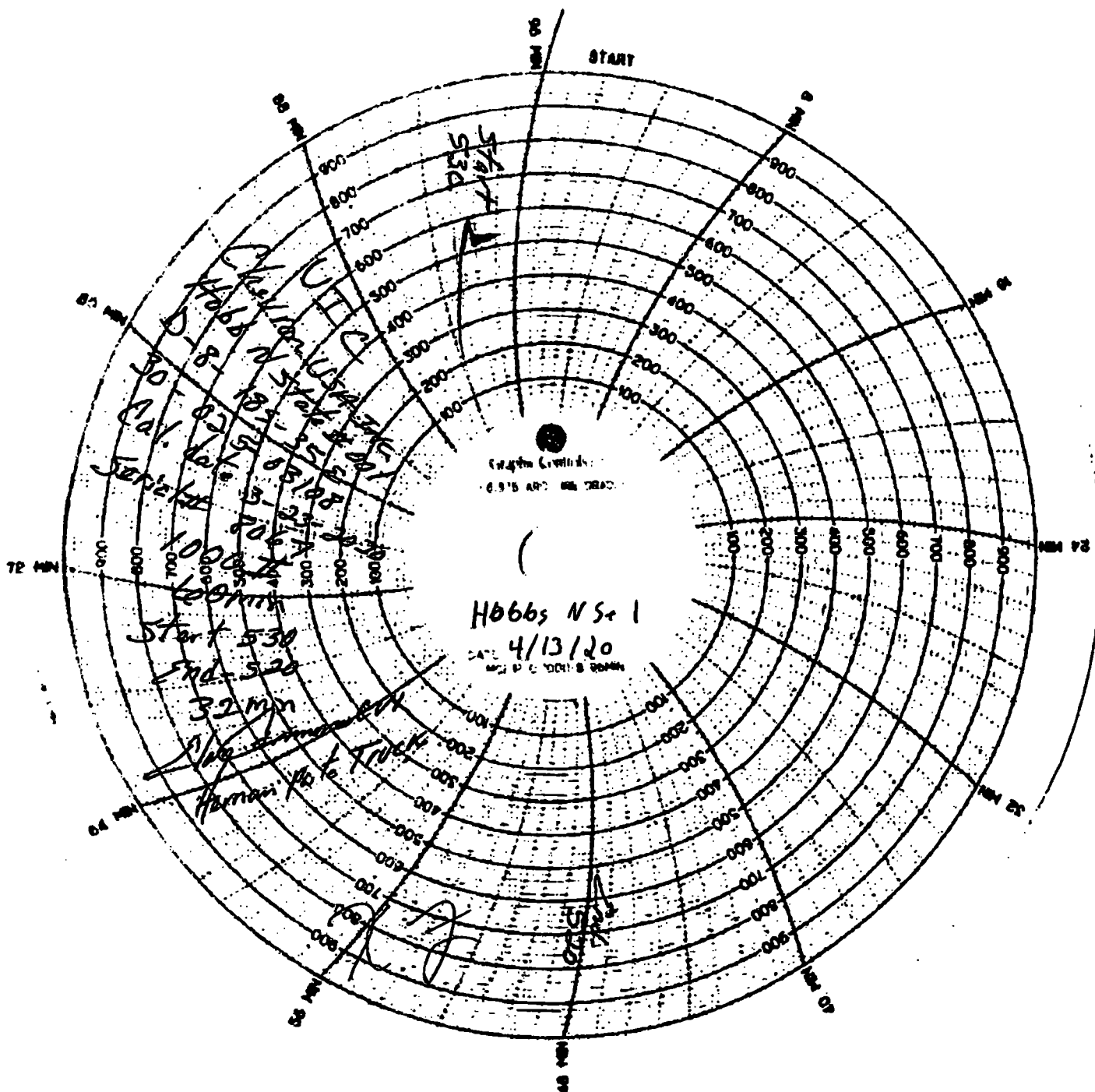
TITLE

CO A

DATE

4-24-20

Conditions of Approval (if any):



District I
1635 N. Pecos Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720

State of New Mexico
Energy, Minerals and Natural Resources Department
Oil Conservation Division Hobbs District Office

BRADENHEAD TEST REPORT

Operator Name <i>Chevron USA Inc.</i>	API Number <i>30-02503108</i>
Property Name <i>Hobbs N State Unit #</i>	Well No. <i># 001</i>

¹ Surface Location

UL - Loc <i>D</i>	Section <i>8</i>	Township <i>18S</i>	Range <i>35E</i>	Feet from <i>330</i>	NS Line <i>FNL</i>	Feet From <i>358</i>	E/W Line <i>FNL</i>	County <i>Lea</i>
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Well Status

TA'D Well <input checked="" type="radio"/> YES <input type="radio"/> NO	SHUT-IN <input checked="" type="radio"/> YES <input type="radio"/> NO	INJECTOR <input type="radio"/> INJ <input type="radio"/> SWD	PRODUCER <input checked="" type="radio"/> OIL <input type="radio"/> GAS	DATE <i>4-13-2020</i>
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OBSERVED DATA

	(A)Surf Intern	(B)Intern (A)	(C)Intern (B)	(D)Prod Case	(E)Testing
Pressure	<i>0</i>			<i>0</i>	<i>0</i>
Flow Characteristics					
Pull	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	CO2 _____
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	WTR _____
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	GAS _____
Down to nothing	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	If applicable type _____
Gas or Oil	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	Fluid injected for <input checked="" type="checkbox"/>
Water	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	Waterflood

Remarks: Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

TA-Extension
MIT - Passed

Signature: <i>[Signature]</i>	OIL CONSERVATION DIVISION
Printed name: <i>Eloy Carmone</i>	Entered into RBDMS
Title: <i>OSPS</i>	Re-test <i>[Signature]</i>
E-mail Address: <i>ECarmone@chevron.com</i>	
Date: <i>4-13-2020</i>	
Phone: <i>575-200-6265</i>	
Witness:	