

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

Rec'd 05/21/2020 - NMOCD

Form C-103  
Revised July 18, 2013

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

WELL API NO. <b>30-015-46927</b>
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name <b>CB BERU 23 14 FEE 06</b>
8. Well Number <b>302H</b>
9. OGRID Number <b>4323</b>
10. Pool name or Wildcat <b>CULEBRA BLUFF; BONE SPRING, SOUTH</b>

SUNDRY NOTICES AND REPORTS ON WELLS (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.)	
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	7. Lease Name or Unit Agreement Name
2. Name of Operator <b>CHEVRON USA INC</b>	8. Well Number <b>302H</b>
3. Address of Operator <b>6301 DEAUVILLE BLVD., MIDLAND, TX 79706</b>	9. OGRID Number <b>4323</b>
4. Well Location Unit Letter <b>P</b> : <b>470</b> feet from the <b>SOUTH</b> line and <b>850</b> feet from the <b>EAST</b> line Section <b>23</b> Township <b>23S</b> Range <b>28E</b> NMPM County <b>EDDY</b>	10. Pool name or Wildcat <b>CULEBRA BLUFF; BONE SPRING, SOUTH</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>2,996'</b>	

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <b>CHANGE TO ORIGINAL APD</b>	<input checked="" type="checkbox"/>	OTHER:	<input type="checkbox"/>

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.

Chevron respectfully requests the following changes to the approved application to drill:

-BOP Pressure Test Update:

BLOWOUT PREVENTION			
BOP Type	Working Pressure	Test Pressure	Manufacturer
Annular	5000 psi	3500 psi	TBD
Blind	10000 psi	5000 psi	TBD
Pipe	10000 psi	5000 psi	TBD

- Revised ground water depth based on actuals from nearby CB CAL Pad to 60 feet.

- Surface casing set depth:

Setting Depth: 290' Sacks of cement: 200 Fluid Type: Fresh Water

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 Kayla McConnell TITLE Permitting Specialist DATE 5/20/2020

Type or print name KAYLA MCCONNELL E-mail address: GNCV@CHEVRON.COM PHONE: 432.687.7375

**For State Use Only**

APPROVED BY: Raymond N. Duda TITLE Geologist DATE 5/27/2020

Conditions of Approval (if any):