Submit 1 Copy To Appropriate District Office	Energy, Minerals and Natural Resources		EMNRD-OCD AI REC'D: 7/24/202		
<u>District I</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283			WELL API NO. 30-015-46929		
811 S. First St., Artesia, NM 88210 District III – (505) 334-6178	OIL CONSERVATION DIVISION 1220 South St. Francis Dr.		5. Indicate Type of Lease		
1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM	Santa Fe, NM 87505		6. State Oil &	E E FEE 🛛 z Gas Lease No.	
87505	ICES AND REPORTS ON WELL	S	7 Lesse Nam	ne 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				BERU 23 14 FEE 06	
PROPOSALS.) 1. Type of Well: Oil Well 🖾 Gas Well 🗌 Other				8. Well Number 402H	
2. Name of Operator CHEVRON USA INC			9. OGRID Nu	umber <b>4323</b>	
3. Address of Operator			10. Pool nam		
6301 DEAUVILLE BLVD., MIDLAND, TX 79706			PURPLE SA	GE; WOLFCAMP (GAS)	
4. Well Location					
Unit Letter P :	470 feet from the SOUT				
Section 23	Township <b>23S</b> 11. Elevation (Show whether D	Range 28E	NMPM	County EDDY	
	2,996				
12. Check Appr	opriate Box to Indicate Natu	are of Notice, Re	eport or Other I	Data	
NOTICE OF IN PERFORM REMEDIAL WORK TEMPORARILY ABANDON PULL OR ALTER CASING DOWNHOLE COMMINGLE CLOUED-LOOP SYSTEM	ITENTION TO:   PLUG AND ABANDON   CHANGE PLANS   MULTIPLE COMPL	REMEDIAL WC COMMENCE D CASING/CEME	RK [ RILLING OPNS.⊵		
OTHER:	l operations. (Clearly state all pertine	OTHER:	antinent detectionalus	ling agtimated data of starting	
	E 19.15.7.14 NMAC. For Multiple C				
6/26/20 – Notified Gilbert Cordero @	NMOCD of intent to spud well.				
6/29/20 - Spud well.					
6/29/20 - Drilled 17 <sup>1</sup> /2" surface hole t in place with 294 sks, Class C cmt, 14 Pressure test 13-3/8" surface casing to	bbls cmt to surface. Full returns				
commence	Report of commencement ment of drilling operations 103. The report shall indice	, the operator	shall file a rep	port of commencement	
Spud Date: 6/29/2020	Rig Release D	ate:			
I hereby certify that the information a	bove is true and complete to the b	est of my knowledg	ge and belief.		
SIGNATURE	TITLE	Permitting Special	ist]	DATE <u>7/24/2020</u>	
Type or print name <u>Laura Becer</u> For State Use Only	ra E-mail addres	s: <u>LBecerra@C</u>	hevron.com ]	PHONE: <u>(432) 687-7665</u>	
APPROVED BY:	TITLE	Staff Man	agerr	DATE 7/31/2020	

APPROVED BY:	P	ala
Conditions of Approval	(if any):	