Submit I Copy To Appropriate District Office	State of New Mexico	Form C-103		
<u>District 1</u> – (575) 393-6161	Energy, Minerals and Natural Resources	Revised August 1, 2011		
1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283		WELL API NO. 30-015-41118		
811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION	5. Indicate Type of Lease		
<u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.	STATE X FEE		
District IV - (505) 476-3460	Santa Fe, NM 87505	6. State Oil & Gas Lease No.		
1220 S. St. Francis Dr., Santa Fe, NM 87505				
	S AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name		
(DO NOT USE THIS FORM FOR PROPOSAL	S TO DRILL OR TO DEEPEN OR PLUG BACK TO A	SKEEN 2 26 27 ST		
DIFFERENT RESERVOIR. USE "APPLICAT PROPOSALS.)	TION FOR PERMIT" (FORM C-101) FOR SUCH	·		
1. Type of Well: Oil Well X Ga	8. Well Number 4H			
2. Name of Operator Chevron, U S A	9. OGRID Number			
	4323			
3. Address of Operator 15 Smith Road Midland, TX 7	10. Pool name or Wildcat			
· · · · · · · · · · · · · · · · · · ·	9703	DELWARE RIVER; BONE SPRING		
4. Well Location	El front from the North line and 10	Ol foot from the Foot line		
Unit Letter A : 17:				
Section 2	Township 16 S Range 27 E 1. Elevation (Show whether DR, RKB, RT, GR, etc.)	NMPM County EDDY		
	11. Elevation (<i>Show whether DK</i> , KKB, K1, GK, etc. 3159' GR			
2012 Article Control of Control o	5137 GK	control of the state of the sta		
12 Check An	propriate Box to Indicate Nature of Notice	Report or Other Data		
iz. Check rip	or oprime box to marcate realist of recise	, report of other batta		
NOTICE OF INTE		BSEQUENT REPORT OF:		
 -	PLUG AND ABANDON 🔃 REMEDIAL WO			
	— I	RILLING OPNS. P AND A		
	MULTIPLE COMPL	NT JOB		
DOWNHOLE COMMINGLE				
OTHER:	☐ OTHER:			
13. Describe proposed or complete	ed operations. (Clearly state all pertinent details, a			
	SEE RULE 19.15.7.14 NMAC. For Multiple Co	ompletions: Attach wellbore diagram of		
proposed completion or recom	pletion.	· .		
	ed casing and cement plan for the SKEEN 2 26 27	ST 4H well.		
If we need to file any additional info	rmation for the C-103 permit, please advise.			
		DEOCULE		
		RECEIVED		
		APR 26 2013		
		NMOCD ARTES'A		
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Spud Date:	Rig Release Date:			
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		·		
I hereby certify that the information abo	ove is true and complete to the best of my knowled	ge and belief.		
	r h			
SIGNATURE M.	TITLE Regulatory Specialist II	DATE 04/25/2013		
Sidivisions.	111 DE Regulatory Specialist II	DA16 04/23/2013		
Type or print name Bryan Arrant (Age	nt) E-mail address: bryan.arrant@c	hk.com PHONE: (405)935-3782		
For State Use Only	1	1 /		
APPROVED BY	() () () () () () () () () ()	1500 SITT 5/1/2012		
APPROVED BY: Conditions of Approval (If any):	TITLE D'S d'Eyen	DATE 3/1/70/3		
Conditions of Approval III dily I.		/ /		

Skeen 2-26-27 ST 4H

!	Hole Size	Casing Size	Casing Weight	Setting Depth	Estimated TOC	Bottom of Cemented	Sacks of Cement
Туре	(")	(in)	(#'s)	(ft)	(ft)	Interval (ft)	(sx)
Surface	17.5	13.375	48	450	0	450	600
Intermediate	12.25	9.625	40	2,250	0	2,250	1,000
Production	8.75	5.5	17 .	12,504	1,750	8,078	900
		** Lateral will be an OH Packer Completion (no cement) from 12,504' (TD) to 8,078' (End of Curve). There will be a stage tool at the End of Curve to cement back up to 500' inside Intermediate csg thru.					