| Submit I Copy To Appropriate District | State of New Mexico | | | Form C-103 | |
|---|--|---------------------|--|--|--|
| Office District I - (575) 393-6161 | Energy, Minerals and Natural Resources | | | Revised July 18, 2013 | |
| 1625 N. French Dr., Hobbs, NM 88240 | | | WELL API NO. | | |
| District 11 - (575) 748-1283 | OIL CONSERVATION DIVISION | | 30-015-41848 | | |
| 811 S. First St., Artesia, NM 88210 District III – (505) 334-6178 | | | 5. Indicate Type of | | |
| 1000 Rio Brazos Rd., Aztec, NM 87410 | 1220 South St. Francis Dr. | | STATE | FEE FEDX | |
| <u>District IV</u> - (505) 476-3460 | Santa Fe, NM 87505 | | 6. State Oil & Gas | s Lease Nó. | |
| 1220 S. St. Francis Dr., Santa Fe, NM | | | | | |
| 87505 SLINIDBY NOT | ICES AND REPORTS ON WELLS | | 7 Lanca Nama or | Unit Agreement Name | |
| | ICES AND REPORTS ON WELLS ISALS TO DRILL OR TO DEEPEN OR PLU | | 7. Lease, Ivalile, Of | Olli Agreement Name | |
| | CATION FOR PERMIT" (FORM C-101) FO | | HAYHURST 181 | CEDEDAI | |
| PROPOSALS.) | - NIM OU C | ONCEDVATIO | | | |
| 1. Type of Well: Oil Well Gas Well Other NM OIL CONSERVATION 8. Well Number #1.H | | | | | |
| 2. Name of Operator | ARTESIA DISTRICT | | 9. OGRID Number | | |
| CHEVRON USA INC | AUG 1 4 2014 | | 4323: | | |
| 3. Address of Operator | | | 10. Pool name or Wildcat | | |
| 1616 W. BENDER BLVD HOBB | • | | COTTONWOOD DRAW;BONE SRPING | | |
| 4. Well Location RECEIVED | | | | | |
| Unit Letter A: 340 feet from the NORTH line and 1040 feet from the EAST line | | | | | |
| Section 18 Township 25S Range 27E NMPM County EDDY | | | | | |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) | | | | | |
| and the second second second second | 3209, | , KKB, KT; GK, eic. | | 111200 00000 | |
| | a 320/ | ····· | 143 | 4.0 | |
| 10 051 | A CONTRACTOR OF CASE OF CASE | the second second | n | n. | |
| 12. Check | Appropriate Box to Indicate N | ature of Notice, | Report or Other | Data. | |
| NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: | | | | | |
| PERFORM REMEDIAL WORK | | | | | |
| · · · · · · · · · · · · · · · · · · · | | | | | |
| TEMPORARILY ABANDON | - William Commercial C | | | | |
| PULL OR ALTER CASING | MULTIPLE COMPL | CASING/CEMEN | T JOB 📙 | | |
| DOWNHOLE COMMINGLE | | } | | | |
| CLOSED-LOOP SYSTEM | ·r | 071150 | >>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>> | F-74 | |
| OTHER: PRESSURE TESTS: | | | | | |
| 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. | | | | | |
| proposed completion of recompletion: | | | | | |
| | | | | | |
| CHEVRON USA INC HAS CONDUCTED THE FOLLOWING PRESSURE TESTS ON ABOVE WELL: | | | | | |
| 03/26/14 PRESSURE TEST LOWER MASTER VALVE TO LOW TEST 250 PSI AND HIGH TEST 8000 PSI | | | | | |
| SUCCESSFULLY, PRESSURE TEST SURFACE EQUIPMENT 50 PSI LOW, 2000 PSI HIGH. | | | | | |
| PERFORMED INJECTION TEST ON 9 5/8 ANNULUS, RECORDED MAX PRESSURE OF 1030 PIS AT 3 BPM WITH | | | | | |
| FRESH WATER FOR A TOTAL OF 20 BBLS.PUMPED. | | | | | |
| 04/11/14 PRESSUE TEST LUBRICATOR AND BOP'S TO 2000 PSI, PULL UP TO 500' CLOSE IN MANIFOLD AND | | | | | |
| PRESSURE UP ON CASING TO 1000 PSI. FOR 15 MINUTES, GODD TEST, MONITOR INTERMEDIATE CASING | | | | | |
| STAYED AT 0 PSI, BLEED PRESSURE OFF. | | | | | |
| 04/16/14 TEST INTERMEDIATE CASING TO 780 PSI FOR 30 MINUTES, GOOD TEST. | | | | | |
| 04/17/14 PRESSURE TEST 5.5 PRODUCTION CASING, 750 PSI LOW TEST, 8000 PSI HIGH AND CHART FOR 30 | | | | | |
| MINUTES. SUCCESSFUL TEST. | | | | | |
| NOTE: CHARTS SENT T | O BLM AND BLM APPROVED. | | | | |
| | | | | | |
| Smid Data: 01/25/2014 | | 07/01/2014 | ************************************** | | |
| Spud Date: 01/25/2014 | Rig Release Da | ite: 07/01/2014 | | | |
| | | <u> </u> | | | |
| | | | | | |
| I hereby certify that the information | above is true and complete to the be | est of my knowledg | ge and belief: | | |
| 0. | | • | | | |
| (1 1) | Υ Λ '. Λ | | | | |
| SIGNATURE SON HOLLEN | - Mullo TITLE PERM | HTTING SPECIAL | <u>JST</u> DAT | E 08/14/2014 | |
| <u> </u> | | | | | |
| Type or print name CINDY HERRE | RA-MURILLO E-mail address: | Cherreramurillo@c | hevron:com PH | ONE: <u>575-263-0431</u> | |
| For State Use Only | | | | ************************************** | |
| Acces | HARDED TITLE | | • | D 11/11/ | |
| APPROVED BY: | TITLE_ | | DA | TE 8-14-14 | |
| Conditions of Approval (if any): | | | | • | |