

NM OIL CONSERVATION

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

ARTESIA DISTRICT

OCD, Artesia
Feb 23 2015FORM APPROVED
OMB NO. 1004-0135
Expires: July 31, 2010**SUNDRY NOTICES AND REPORTS ON WELLS**
Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.

RECEIVED

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM111530
2. Name of Operator CHEVRON USA INC		6. If Indian, Allottee or Tribe Name
Contact: CINDY H MURILLO E-Mail: CHERRERAMURILLO@CHEVRON.COM		7. If Unit or CA/Agreement, Name and/or No.
3a. Address 1616 W. BENDER BLVD HOBBS, NM 88240	3b. Phone No. (include area code) Ph: 575-263-0431 Fx: 575-263-0445	8. Well Name and No. HAYHURST 18 FEDERAL 1H
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 18 T25S R27E Mer NMP NENE 340FNL 1040FEL		9. API Well No. 30-015-41848
		10. Field and Pool, or Exploratory COTTONWOOD DRAW; BONE SPRI
		11. County or Parish, and State EDDY COUNTY, NM

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other Well Spud
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleate horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleation in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

CHEVRON USA INC HAS COMPLETED THE FOLLOWING TO THE ABOVE WELL:

01/25/2014 SPUD 17 1/2 HOLE TD HOLE @ 425; 13 3/8 48# H-40 ST&C CSG. CEMENTED 465 SXS OF HAL CEMENT C W/ADDITIVES CIRCULATED 2 HI-VIS SWEEPS TO CLEAN AND CONDITION HOLE FOR CASING AND CEMENT. DRILLED 12 1/4 INTERMEDIATE FROM 425-2033, 9 5/8 40# K-55, PUMPED 545 SXS OF EXTENDACEMAND THEN PUMPED 215 SXS OF HAL CEM-C. CIRCULATE HOLE 1.5 X BOTTOMS UP AND PUMP TWO HI-VIS SWEEPS TO CONDITION HOLE. CONTINUE DRILLING 2275 TO 6955. DRILLED 8 3/4 PRODUCTION CASING FROM 6955-11786, 5.5 17# P110, PRE-CEMENT CIRCULATION, RIG UP AND PUMP PRODUCTION CEMENT. MIX AND PUMP 1693 SXS OF CLASS H CEMENT, DROP PLUG AND DISPLACE CEMENT W/24 BBLs MSA, DISPLACE W/249 BBL OF FRESH WATER. BLEED OFF PRESSURE-FLOATS HELD, NO SPACER0 SKX OF CEMENT TO SURFACE. CEMENT IN PLACE.

Accepted for record
ARD 3/24/15

14. I hereby certify that the foregoing is true and correct.

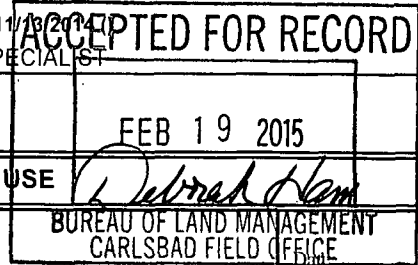
Electronic Submission #256192 verified by the BLM Well Information System
For CHEVRON USA INC, sent to the Carlsbad
Committed to AFMSS for processing by DUNCAN WHITLOCK on 11/19/2014

Name (Printed/Typed) CINDY H MURILLO

Title PERMITTING SPECIALIST

Signature (Electronic Submission)

Date 08/07/2014



THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By

Title

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED **