Form 3160-5 (August 2007)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

FORM APPROVED OMB No. 1004-0137 Expires: July 31, 2010

Expires: July 3 5. Lease Serial No. NMNM98120

NMN

6. If Indian, Allottee or Tribe Name

Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.			o. 17 monus, 1 monuse o.		
SUBMIT IN TRIPLICATE – Other instructions on page 2. 1. Type of Well			7. If Unit of CA/Agreement, Name and/or No. NMNM71030C		
☐ Oil Well ☐ Gas Well ☐ Other			8. Well Name and No. Skelly Unit 645		
2. Name of Operator CHEVRON USA INCORPORATED COG Operating LLC (Agent)			9. API Well No. 30-015-40727		
3a. Address 3b. Phone No. (include area code)			10. Field and Pool or Exploratory Area		
(Agent) One Concho Center 600 W. Illinois Ave. Midland, TX 79701 432-686-3087			FREN; GLORIETA-YESO		
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)			11. Country or Parish, State		
Sec 14 T17S R31E 384FNL 2313FWL, Unit C			EDDY COUNTY, NM		
12. CHECK THE APPROPRIATE BOX(I	ES) TO INDICA	TE NATURE	OF NOTIC	E, REPORT OR OTHE	R DATA
TYPE OF SUBMISSION	TYPE OF ACTION				
Notice of Intent Acidize Alter Casing	Deepen Fracture	Freat	_	uction (Start/Resume) mation	Water Shut-Off Well Integrity
Subsequent Report Casing Repair	New Con		Recor	ecomplete Other	
Change Plans	Plug and			orarily Abandon	***************************************
Final Abandonment Notice Convert to Injection 13. Describe Proposed or Completed Operation: Clearly state all pertine	Plug Bac			Disposal	
testing has been completed. Final Abandonment Notices must be f determined that the site is ready for final inspection.) Interim Reclamation complete. Downsized: 50' on the South side & 60' on the East side	final inspection.) (D) 1/10/15 Accepted for record NMOCD				
Ready for inspection.	NOV 16	2015	Appro	л Obiectives a	od Purposes. O Onsite Inspection. Ore not achieved, be required.
14. I hereby certify that the foregoing is true and correct. Name (Printed'T)	reby certify that the foregoing is true and correct. Name (Printed/Typed)				
Chasity Jackson		Title PREPARER			
Signature Classoft Date 10/15/2014					
THIS SPACE FO	OR FEDERA	L OR STA	TE OFF	ICE USE	
Approved by					
Conditions of approval, if any, are attached. Approval of this notice does not that the applicant holds legal or equitable title to those rights in the subject leentitle the applicant to conduct operations thereon. Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crit	ease which would	Office	willfully to	Da make to any department	

fictitious or fraudulent statements or representations as to any matter within its jurisdiction.