| Submit 1 Copy To Appropriate District Office | State of New Mexico | | | Form C-103 |
|--|--|------------|--------------------------|---|
| District I (575) 393-6161 | Energy, Minerals and Natural Resources | | | Revised July 18, 2013 WELL API NO. |
| 1625 N. French Dr., Hobbs, NM 88240 District II - (575) 748-1283 | OIL CONSERVATION DUVIDION | | | 30-015-25530 |
| 811 S. First St., Artesia, NM 88210 <u>District III</u> - (505) 334-6178 | OIL CONSERVATION DIVISION | | | 5. Indicate Type of Lease |
| 1000 Rio Brazos Rd., Aztec, NM 87410 | 1220 South St. Francis Dr. | | | STATE FEE FED X |
| <u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM | Santa Fe, NM 87505 | | | 6. State Oil & Gas Lease No. |
| 87505 | | | | |
| SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A | | | | 7. Lease Name or Unit Agreement Name |
| DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH | | | | PHILLIPS SWD FEDERAL |
| PROPOSALS.) | | | | 8. Well Number #1 |
| 2. Name of Operator | | | | 9. OGRID Number |
| CHEVRON USA INC | RON USA INC | | | 4323 |
| 3. Address of Operator | | | 10. Pool name or Wildcat | |
| 6301 DEAUVILLE BLVD, MIDLAND TX 79706 | | | | SWD ; CHERRY CANYON |
| 4. Well Location | | | | |
| Unit Letter O 330 feet from the SOUTH Source Source Section OI Township 26S Range 29E NMPM County EDDY | | | | |
| Section 01 Township 26S Range 29E NMPM County EDDY 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 11. Elevation (Show whether DR, RKB, RT, GR, etc.) | | | | |
| 3000' GL | | | | |
| | | | | |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data | | | | |
| NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: | | | | |
| | | | REMEDIAL WOR | SEQUENT REPORT OF: K 🛛 🛛 ALTERING CASING 🗌 |
| TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS P AND A | | | | |
| PULL OR ALTER CASING DI MULTIPLE COMPL DI CASING/CEMENT JOB | | | | |
| | | | | |
| CLOSED-LOOP SYSTEM | , | | OTHER: | п |
| 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. | | | | |
| THIE PHILLIPS SWD #1 RECENTLY FAILED AN MIT TEST. CHEVRON'S DRLLING AND COMPLETIONS | | | | |
| DEPARTMENT PERFORMED DIAGNOSTICS TO UNDERSTAND THE LOCATION OF THE LEAK, CHEVRON | | | | |
| IDENTFIED THE LOCATION OF THE LEAK BY PRESSURE TESTING THE TUBING, CASING AND PACKER. THE | | | | |
| DRILLING ENGINEER DETERMINED THAT THE PACKER/SEAL ASSEMBLY WAS LEAKING. THUS, CHEVRON | | | | |
| REPAIRED THE LEAK BY REPLACING THE PACKER/SEAL ASSEMBLY. | | | | |
| | | | | |
| ATTACHED IS A COPY OF MIT PERFORMED BY NMOCD/RICHARD INGE. NM OIL CONSERVATION | | | | |
| | | | | ARTESIA DISTRICT |
| | | | | FEB 11 2 2018 |
| Spud Date: | Rig | Release Da | atë: | |
| I,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | |
| | | | | RECEIVED |
| | | | | |
| I hereby certify that the information above is true and complete to the best of my knowledge and belief. | | | | |
| t. | | | | |
| SIGNATURE ("A A AGO AL | muin m | | | |
| SIGNATURE Lightonere Muillo TITLE PERMITTING SPECIALIST DATE 01/11/2018 | | | | |
| Type or print name <u>CINDY HERRERA-MURILLO</u> E-mail address: <u>EEOF@chevron.com</u> PHONE: <u>575-263-0431</u> | | | | |
| For State Use Only | | | | |
| APPROVED BY: RIGHT WGE TITLE COMPLANCE OFFICE DATE 2/9/10 | | | | |
| Conditions of Approval (if any): | | | | |
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