Submit One Copy To Appropriate Office <u>District I</u> 1625 N. French Dr., Hobbs, NM 8	<u>Fict I</u> Energy, Minerals and Natural Resources		xico ral Resources	Form C-103 Revised November 3, 2011 WELL API NO.
District II Bill S. First St., Artesia, NM 88210 OIL CONSERVATION DIVISION			DIVISION	30-015-26622
District III 1000 Rio Brazos Rd., Aztec, NM	tIII RECEIMEDO South St. Francis Dr			5. Indicate Type of Lease STATE FEE
District IV Santa Fe, NM 87505			6. State Oil & Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, 87505	NM			
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH			7. Lease Name or Unit Agreement Name USA CAVINESS PAINE	
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other				8. Well Number 4
2. Name of Operator				9. OGRID Number
Chevron USA, Inc.			4323	
 Address of Operator 6301 Deauville Blvd., Midland, TX 79706 			10. Pool name or Wildcat Loving, Brushy Canyon. East	
4. Well Location: Unit Letter_J_:2310_feet from the <u>SOUTH</u> line and <u>1650</u> feet from the <u>EAST</u> line				
Section <u>15</u> Township <u>23-S</u> Range <u>28-E</u> NMPM County <u>EDDY</u>				
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 2997' GL				
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND A PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB CASING/CEMENT JOB				
OTHER:				
 All pits have been remediated in compliance with OCD rules and the terms of the Operator's pit permit and closure plan. Rat hole and cellar have been filled and leveled. Cathodic protection holes have been properly abandoned. A steel marker at least 4" in diameter and at least 4' above ground level has been set in concrete. It shows the 				
<u>OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, QUARTER/QUARTER LOCATION OR</u> <u>UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATION HAS BEEN WELDED OR</u> <u>PERMANENTLY STAMPED ON THE MARKER'S SURFACE.</u>				
 The location has been leveled as nearly as possible to original ground contour and has been cleared of all junk, trash, flow lines and other production equipment. If we have been cut off at least two feet below ground level. Anchors, dead men, tie downs and risers have been cut off at least two feet below ground level. If this is a one-well lease or last remaining well on lease, the battery and pit location(s) have been remediated in compliance with OCD rules and the terms of the Operator's pit permit and closure plan. All flow lines, production equipment and junk have been removed from lease and well location. All metal bolts and other materials have been removed. Portable bases have been removed. (Poured onsite concrete bases do not have to be removed.) All other environmental concerns have been addressed as per OCD rules. Pipelines and flow lines have been abandoned in accordance with 19.15.35.10 NMAC. All fluids have been removed from non-retrieved flow lines and pipelines. If this is a one-well lease or last remaining well on lease: all electrical service poles and lines have been removed from lease and well location, except for utility's distribution infrastructure. 				
When all work has been completed, return this form to the appropriate District office to schedule an inspection.				
SIGNATURE <u>Katherine Papageorge</u> TITLE Decommissioning Project Manager DATE 10.11.19				
TYPE OR PRINT NAME _ For State Use Only	_Katherine Papageorge_E	E-MAIL: _Katheri	ne.Papageorge@ch	evron.com PHONE: 832-854-5291
APPROVED BY:	DENILL	TITLE	DENILL	evron.comPHONE:832-854-5291 G C DATE_11/12/19