

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTCarlsbad Field Office  
OCD ArtesiaFORM APPROVED  
OMB NO. 1004-0137  
Expires: January 31, 2018**SUNDRY NOTICES AND REPORTS ON WELL**  
*Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.*

|                                                                                                                                                    |                                                                           |                                                                   |
|----------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|-------------------------------------------------------------------|
| <b>SUBMIT IN TRIPLICATE - Other instructions on page 2</b>                                                                                         |                                                                           | 5. Lease Serial No.<br>NMNM113941                                 |
| 1. Type of Well<br><input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other                   |                                                                           | 6. If Indian, Allottee or Tribe Name                              |
| 2. Name of Operator<br>CHEVRON USA INCORPORATED                                                                                                    |                                                                           | 7. If Unit or CA/Agreement, Name and/or No.<br>NMNM134934         |
| Contact: CINDY H MURILLO<br>E-Mail: CERRERAMURILLO@CHEVRON.COM                                                                                     |                                                                           | 8. Well Name and No.<br>SKEEN 22 26 26 FEDERAL COM 7H             |
| 3a. Address<br>15 SMITH ROAD<br>MIDLAND, TX 79705                                                                                                  | 3b. Phone No. (include area code)<br>Ph: 575-263-0431<br>Fx: 575-263-0445 | 9. API Well No.<br>30-015-42889-00-S1                             |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)<br>Sec 22 T26S R26E SESE 402FSL 660FEL<br>32.021631 N Lat, 104.273727 W Lon |                                                                           | 10. Field and Pool or Exploratory Area<br>BONE SPRINGS<br>WILDCAT |
|                                                                                                                                                    |                                                                           | 11. County or Parish, State<br>EDDY COUNTY, NM                    |

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

| TYPE OF SUBMISSION                                   | TYPE OF ACTION                                |                                               |                                                    |                                           |
|------------------------------------------------------|-----------------------------------------------|-----------------------------------------------|----------------------------------------------------|-------------------------------------------|
| <input checked="" 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 type="checkbox"/> Subsequent Report           | <input type="checkbox"/> Alter Casing         | <input type="checkbox"/> Hydraulic Fracturing | <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 |
|                                                      | <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 recomplete 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 must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must 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 REQUESTS TO ADD PROCESS EQUIPMENT FOR THE ABOVE WELL TO ADD GAS LIFT DESIGN. A NATURAL GAS COMPRESSOR WILL BE INSTALLED ON THE EXISTING WELL PAD TO PROVIDE COMPRESSION FOR GAS LIFT. EQUIPMENT WILL BE SET ON EXISTING DISTURBANCE AND WILL NOT REQUIRE ANY NEW GROUND DISTURBANCE. IN ADDITION TO THE GAS COMPRESSOR A 20' X 7 SUCTION SCRUBBER AND 100 BBL WILL ALSO BE ADDED AND INSTALLED ON EXISTING PAD DISTURBANCE.

EQUIPMENT LIST  
GAS DRIVEN COMPRESSOR (ANCILLARY EQUIPMENT INCLUDES COMPRESSOR RESERVE LUBE OIL AND COOLANT DRUMS)  
20'x7 SUCTION VESSEL  
9'-6"x8' 100 BLL TANK

PLEASE SEE ATTACHED PILOT PLAN.  
IF YOU SHOULD HAVE ANY QUESTIONS, PLEASE CONTACT CHRIS SMITH AT 432-687-7249.

**NM OIL CONSERVATION**  
ARTESIA DISTRICT

JAN 03 2017

|                                                                                                                                                                                                                                                                                                      |                             |          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|----------|
| 14. I hereby certify that the foregoing is true and correct.<br><b>Electronic Submission #299895 verified by the BLM Well Information System</b><br><b>For CHEVRON USA INCORPORATED, sent to the Carlsbad</b><br><b>Committed to AFMSS for processing by DEBORAH HAM on 07/13/2015 (15DMH1382SE)</b> |                             | RECEIVED |
| Name (Printed/Typed) CINDY H MURILLO                                                                                                                                                                                                                                                                 | Title PERMITTING SPECIALIST |          |
| Signature (Electronic Submission)                                                                                                                                                                                                                                                                    | Date 04/29/2015             |          |

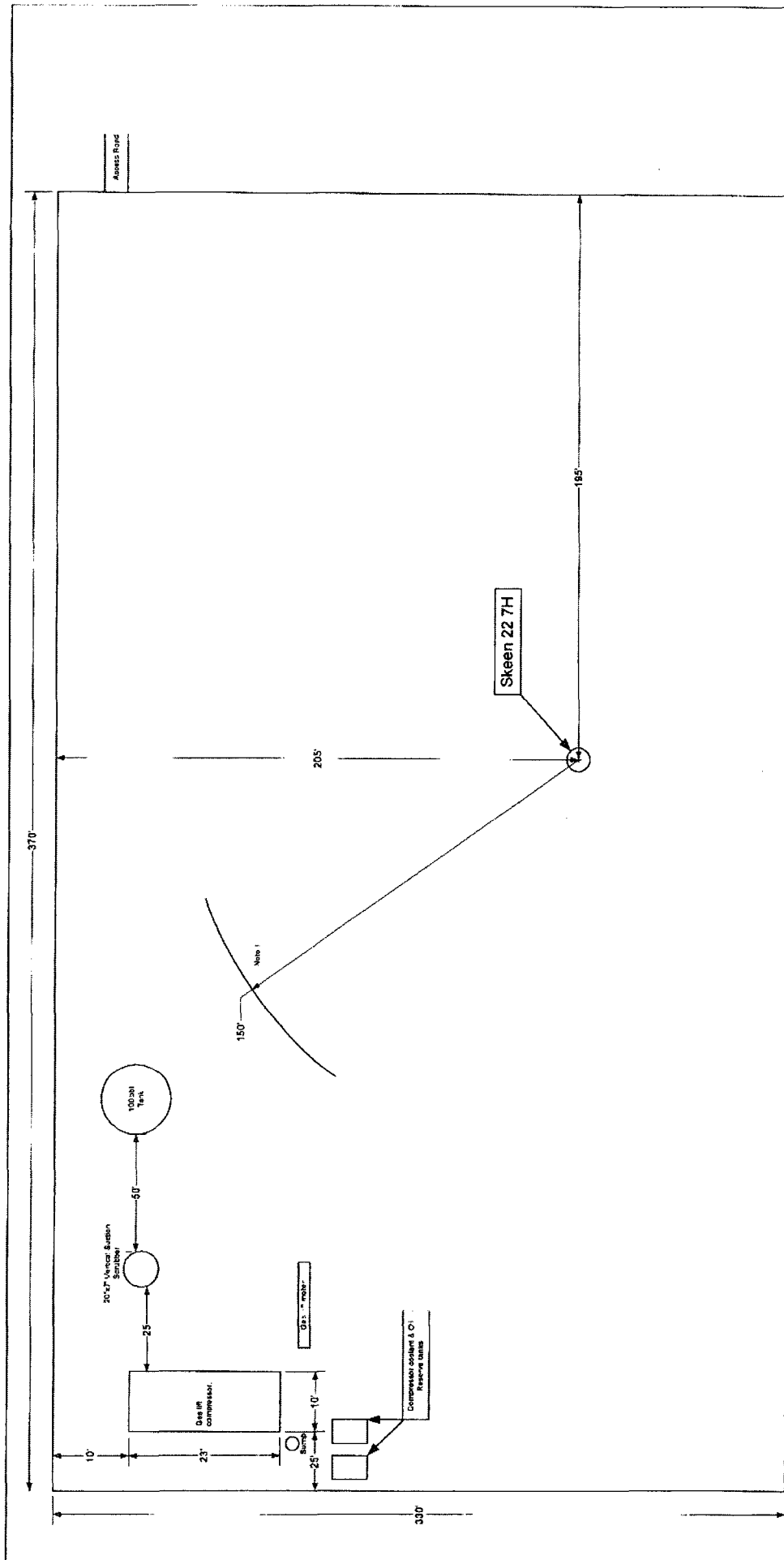
## THIS SPACE FOR FEDERAL OR STATE OFFICE USE

|                                                                                                                                                                                                                                                           |                             |                        |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|------------------------|
| Approved By <u>DUNCAN WHITLOCK</u>                                                                                                                                                                                                                        | Title <u>TECHNICAL LPET</u> | Date <u>12/21/2016</u> |
| 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 Carlsbad        |

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.

(Instructions on page 2)

**\*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\***



#### Notes:

1) Equipment must stay outside 150' fall radius of well head.



Skeen 22 7H Gas Lift Plot plan

|       |          |        |        |
|-------|----------|--------|--------|
| SIZE  | PLOTTING | DWG NO | REV    |
| SCALE | 1 : 1    | SHEET  | 1 OF 2 |

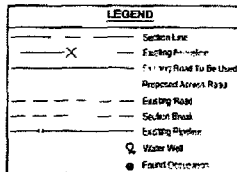




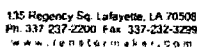


DISCLAIMER: AT THIS TIME, C. H. FENSTERMAKER & ASSOCIATES, LLC HAS NOT PERFORMED NOR WAS ASKED TO PERFORM ANY TYPE OF ENGINEERING, HYDROLOGICAL MODELING, FLOOD PLUMB OR "NO RISK" CERTIFICATION ANALYSES, INCLUDING BUT NOT LIMITED TO, OF DETERMINING WHETHER THE PROJECT WILL IMPACT FLOOD HAZARDS IN CONNECTION WITH FEDERAL, STATE, AND/OR LOCAL LAWS, ORDINANCES AND REGULATIONS. ACCORDINGLY, FENSTERMAKER MAKES NO WARRANTY OR REPRESENTATION OF ANY KIND AS TO THE FOREGOING ISSUES. NO PERSONS OR ENTITIES USING THIS INFORMATION SHALL DO SO AT THEIR OWN RISK.

Wm. J. Darvall III  
Registration No. 15078



PAGE 4 OF 4



Scale: 1"=1000'

A horizontal scale bar with tick marks at 0, 500, and 1000 feet. The text "Scale: 1"=1000'" is centered above the bar.

|                                                             |       |                  |                 |
|-------------------------------------------------------------|-------|------------------|-----------------|
| DRAWN BY: BMO                                               |       | REVISIONS        |                 |
| PROJ. MGR.: GDG                                             | No. 3 | DATE: 04/10/2014 | REVISED BY: BMO |
| DATE: 02/03/2014                                            | No. 4 | DATE: 05/15/2014 | REVISED BY: BMO |
| FILENAME: T:2013\2133015\DWG\SKEEN 22-26 FED COM 7H SUP.dwg |       |                  |                 |