			· ·		
RECEIVED					
Submit One Copy To Appropriate District Office	State of New Me	exico		Form C-103	
Office District I State of New Mexico District I 5 2Ettergy, Minerals and Natural Resources 1625 N. French Dr., Hobbs, NM 88240G 5 2Ettergy, Minerals and Natural Resources District II 811 S. First St., Artesia, NM 88210 District III 1220 South St. Francis Dr. 1000 Rio Brazos Rd., Aztec Santa Fe, NM 87505			Revised WELL API NO.	November 3, 2011	
			30-015-28906		
			5. Indicate Type of Lease		
			6. State Oil & Gas Lease N		
1220 S. St. Francis Dr., Santa Fe, NM 87505	S. St. Francis Dr., Santa Fe, NM			NO.	
SUNDRY NOTICES A	ND REPORTS ON WELLS	6	7. Lease Name or Unit Ag	reement Name	
(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			TODD 2 STATE		
PROPOSALS.)			8. Well Number 3		
1. Type of Well: Oil Well Gas Well Other 2. Name of Operator			9. OGRID Number		
CHEVRON USA INC.			4323		
3. Address of Operator			10. Pool name or Wildcat		
6301 Deauville Blvd., Midland, TX 79705 4. Well Location:			INGLE WELLS, DELAWA	AKE	
4. wen Location: Unit Letter_P_:660feet fi	om the NORTH line	e and 660 fee	t from the <u>EAST</u> line		
	<u>24-S</u> Range <u>31-E</u> NMPM				
11. E	levation (Show whether DR,				
3,501			San Section Section		
12. Check Appropriate Box to Indic	ale nature of notice, R	eport or Other D	ata		
			SEQUENT REPORT (
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRI			K 🗌 ALTERIN LLING OPNS. 🗍 P AND A		
		CASING/CEMEN		· 🗀	
OTHER:					
All pits have been remediated in compl	iance with OCD rules and the	he terms of the Oper	ady for OCD inspection aft	plan	
Rat hole and cellar have been filled and	l leveled. Cathodic protection	on holes have been	properly abandoned.	F	
A steel marker at least 4" in diameter a	nd at least 4' above ground	level has been set in	concrete. It shows the		
OPERATOR NAME, LEASE NA	ME, WELL NUMBER, A	API NUMBER, QU	ARTER/QUARTER LOCA	ATION OR	
<u>UNIT LETTER, SECTION, TO PERMANENTLY STAMPED O</u>	<u>VNSHIP, AND RANGE.</u> N THE MARKER'S SUD	<u>All INFORMATIC</u> EACE	<u>ON HAS BEEN WELDED (</u>	DR	
The location has been leveled as nearly ther production equipment.	as possible to original grou	nd contour and has	been cleared of all junk, trash	, flow lines and	
Anchors, dead men, tie downs and riser	s have been cut off at least	two feet below grou	nd level.		
If this is a one-well lease or last remain	ing well on lease, the batter	y and pit location(s)	have been remediated in con	npliance with	
OCD rules and the terms of the Operator's prometer of the commentation of the commenta	it permit and closure plan.	All flow lines, prod	uction equipment and junk ha	we been removed	
All metal bolts and other materials have	been removed. Portable ba	ses have been remo	ved. (Poured onsite concrete	bases do not have	
o be removed.)					
 Pipelines and flow lines have been abar 	idoned in accordance with 1	9.15.35.10 NMAC.	All fluids have been remove	ed from non-	
etrieved flow lines and pipelines.					
If this is a one-well lease or last remain ocation, except for utility's distribution infr	ing well on lease: all electric	cal service poles and	l lines have been removed fro	om lease and well	
When all work has been completed, return the	is form to the appropriate [District office to sch	edule an inspection.		
IGNATURE <u>Katherine Papag</u>	<u>eorge</u>	Decommissioning I	Project ManagerDATE	_12/19/2018	
YPE OR PRINT NAMEKatherine Papa or State Use Only PPROVED BY:	george_E-MAIL: _Katheri	ne.Papageorge@ch	evron.com PHONE: 83	32-854-5291	
ADDROVED BY		Stoff.		alaba	
IFFRUVED BY	TITLE	I TOTI I	JareDATE	<u>0/1/17</u>	
		-			

APPROVED BY	 Me.	DATE 8	-/9	
				r

-