

DISTRICT I

P.O. Box 1980, Hobbs, NM 88240

DISTRICT II

P.O. Box Drawer DD, Artesia, NM 88210

DISTRICT III

1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

| | |
|--|--|
| WELL API NO. | 30-025-34152 |
| 5. Indicate Type of Lease | STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil / Gas Lease No. | |
| 7. Lease Name or Unit Agreement Name | MONUMENT 12 STATE |
| 8. Well No. | 16 |
| 9. Pool Name or Wildcat | MONUMENT ABO |
| 10. Elevation (Show whether DF, RKB, RT, GR, etc.) | 3745' |

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMITS"
(FORM C-101) FOR SUCH PROPOSALS.

| | |
|--|---|
| 1. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | 2. Name of Operator CHEVRON USA INC |
| 3. Address of Operator 15 SMITH ROAD, MIDLAND, TX 79705 | 4. Well Location Unit Letter <u>E</u> : <u>2083'</u> Feet From The <u>NORTH</u> Line and <u>983'</u> Feet From The <u>WEST</u> Line Section <u>12</u> Township <u>19-S</u> Range <u>36-E</u> NMPM <u>LEA</u> COUNTY |
| 11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data | |

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: PERMIT TO TA ☒

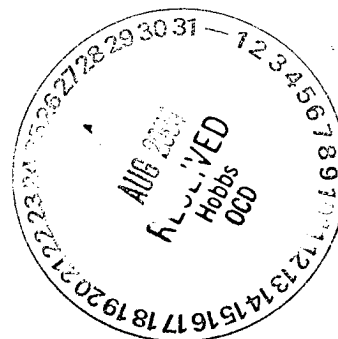
SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPERATION ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: ☐

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

CHEVRON U.S.A. INC. INTENDS TO TEMPORARILY ABANDON THE SUBJECT WELL IN THE ABO RESERVOIR.
THE INTENDED PROCEDURE IS AS FOLLOWS:

- 1) MIRU PU.
- 2) PULL RDS, & PUMP.
- 3) TIH W/BIT, CSG SCRAPER. MAKE BIT TRIP TO 7080.
- 4) SET CIBP @ 7076 OR WITHIN 75' OF CSG SHOE.
- 5) PERFORM MIT (500 PSI FOR 30 MIN).
- 6) RIG DOWN.



I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Denise Leake TITLE Regulatory Specialist DATE 8/23/2004
TYPE OR PRINT NAME Denise Leake Telephone No. 915-687-7375

(This space for State Use)

APPROVED Harry W. White
CONDITIONS OF APPROVAL, IF ANY:

TITLE OC FIELD REPRESENTATIVE II/STAFF MANAGER DATE AUG 27 2004