

State of New Mexico
Energy, Minerals and Natural Resources

HOBBS OCD

NOV 14 2011

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-025-38385
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name ROLLON BRUNSON
8. Well Number 8
9. OGRID Number 4323
10. Pool name or Wildcat PENROSE SKELLY GRAYBURG

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 PROPOSALS)

1. Type of Well: Oil Well ☒ Gas Well ☐ Other ☐

2. Name of Operator
CHEVRON U.S.A. INC.

3. Address of Operator
15 SMITH ROAD, MIDLAND, TEXAS 79705

4. Well Location

Unit Letter G: 2310 feet from the NORTH line and 1390 feet from the EAST line

Section 10 Township 22S Range 37E NMPM County LEA

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

12. 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 ☐ MULTIPLE COMPL ☐
DOWNHOLE COMMINGLE ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐

OTHER:

OTHER: CLEAN OUT ACIDIZE

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.

10-07-11: MIRU.

10-08-11: HOT WTR RODS & TBG.

10-10-11: TIH W/SONIC HAMMER.

10-11-11: TREAT 3569-3890 W/1500 GALS 15% NEFE HCL ACID. PMP 200 BBLS KCL WTR W/4 DRUMS BAKER SCW-358 SCALE INHIB.

10-12-11: TAG FILL @ 4200.

10-13-11: TIH W/PMP & RODS. RIG DOWN. FINAL REPORT

Spud Date:

Rig Release Date:

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

SIGNATURE

Denise Pinkerton

TITLE REGULATORY SPECIALIST

DATE 11-10-2011

Type or print name DENISE PINKERTON

E-mail address: leakejd@chevron.com

PHONE: 432-687-7375

For State Use Only

APPROVED BY:

[Signature]

TITLE

SAH MGT

DATE 11-15-2011

Conditions of Approval (if any):

NOV 15 2011