| Submit 1 Copy To Appropriate District Office | State of New Mexico | | Form C-103 |
|--|-------------------------------------|---------------------|---|
| District I – (575) 393-6161 1625 N French Dr., Hobbs, NM 88240 District II – (575) 748-1283 811 S First St, Artesia, NM 88210 District III – (505) 334-6178 District III – (505) 334-6178 1220 South St. Francis Dr. | | | Revised August 1, 2011 WELL API NO. |
| | | | 30-025-06609 |
| | | | 5. Indicate Type of Lease STATE FEE |
| District III – (505) 334-6178 1000 R10 Brazos Rd, Aztec, NM 87410 JAN 0 6 2012 Santa Fe, NM 87505 | | | 6. State Oil & Gas Lease No. |
| 1220 S. St. Francis Dr., Santa Fe, NM 87505 | | | |
| SUNDRY NOTICES AND REPORTS ON WELLS | | | 7. Lease Name or Unit Agreement Name |
| (DO NOT'USE THIS FORM FOR PROPOS DIFFERENT RESERVOIR USE "APPLIC PROPOSALS) | | | STATE "S" |
| | Gas Well 🛛 | | 8. Well Number 2 |
| 2. Name of Operator CHEVRON U.S.A. INC. | | / | 9. OGRID Number 4323 |
| 3. Address of Operator 15 SMITH ROAD, MIDLAND, TI | EXAS 79705 | | 10. Pool name or Wildcat HARE; SAN ANDRES |
| 4. Well Location | | | |
| Unit Letter C: 660 feet from the NORTH line and 1980 feet from the WEST line | | | |
| Section 15 | Township 21-S Rang | | IMPM 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 IN | | SUBS | SEQUENT REPORT OF: |
| PERFORM REMEDIAL WORK | PLUG AND ABANDON CHANCE BLANC | REMEDIAL WORK | |
| TEMPORARILY ABANDON PULL OR ALTER CASING | CHANGE PLANS MULTIPLE COMPL | COMMENCE DRIL | |
| DOWNHOLE COMMINGLE | _ | | _ |
| OTHER: REQUEST TO RENEW | /TA STATUS | OTHER: MIT W | /CHART FOR TA |
| 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. | | | |
| proposed completion or reco | impletion. | | |
| | NMOCD. TEST CSG TO 510 PSI | FOR 30 MINUTES. | . (ORIGINAL CHART & COPY OF |
| CHART ATTACHED). WITNESSED BY MARK WHITAKER, NMOCD. This Approval of Temporary 20-20-13 | | | |
| WITNESSED BY MARK WHITAKER, NMOCD. This Approval of Temporary - 29-2013 CIBP @ 3994. PERFS: 4020-4030 Abandonment Expires | | | |
| | | | |
| Spud Date: | Rig Release Da | ite: | g and the control of |
| | | | |
| | | | |
| I hereby certify that the information a | bove is true and complete to the be | est of my knowledge | and belief. |
| (Aug De Laite) | | | |
| SIGNATURE LINE WILL TITLE: REGULATORY SPECIALIST DATE: 01-05-2012 | | | |
| Type or print name: DENISE PINKERTON E-mail address: leakejd@cvhevron.com PHONE: 432-687-7375 | | | |
| APPROVED BY DATE 1-9-2012 | | | |
| Conditions of Approval (if any): | | | |
| / () | | | |

