| Submit I Copy To Appropriate District | State of New Me | exico | Form | n C-103 | |
|--|--|------------------------|---|---------|--|
| <u>District I</u> - (575) 393-6161 | District I – (575) 393-6161 Energy, Minerals and Natural Resources | | Revised August 1, 2011 WELL API NO. | | |
| 1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283 811 S. First St. Artesia, NM 88210 OIL CONSERVATION DIVISION | | | 30-025-31453 | / | |
| 811 S. First St., Artesia, NM 88210 District III - (505) 334-6178 | | | 5. Indicate Type of Lease | | |
| 1000 Rio Brazos Rd., Aztec, NM 87410 | ECEVED a Fe NM 87 | 7505 | STATE FEE | | |
| District III – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 8741 RECENVEO South St. Francis Dr. District IV – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505 APR 2 5 2012 | | | 6. State Oil & Gas Lease No. | | |
| | | - | 7. Lease Name or Unit Agreement | Name | |
| SUNDRY NOTIFIES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO THE DATA TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH | | | West Lovington Unit | | |
| PROPOSALS.) | | | 8. Well Number: 88 | ~ | |
| 1. Type of Well: Oil Well Gas Well Other Water Injection 2. Name of Operator Image: Comparison of Comp | | | 9. OGRID Number: 241333 | | |
| Chevron Midcontinent, L.P. | | | 7. OGRID Humon. 241555 | | |
| 3. Address of Operator | | | 10. Pool name or Wildcat | | |
| 15 Smith Road Midland, TX 79705 | ۱ | | West Lovington Upper San | Andres | |
| 4. Well Location | | | | | |
| Unit Letter A: | 130feet from theNorth | | | ne | |
| Section 7 | Township 17-S 11. Elevation (Show whether DR, | Range 36-E | NMPM County | Lea | |
| and the second | 3906' DR | KKD, KI, OK, etc.) | | | |
| | ■ | | | | |
| 12. Check A | Appropriate Box to Indicate N | ature of Notice, | Report or Other Data | ı | |
| NOTICE OF IN | | SUB | SEQUENT REPORT OF: | | |
| PERFORM REMEDIAL WORK | | REMEDIAL WORK | | | |
| TEMPORARILY ABANDON | CHANGE PLANS | COMMENCE DRI | | | |
| PULL OR ALTER CASING | | CASING/CEMENT | JOB 🗌 🔐 | | |
| DOWNHOLE COMMINGLE | | | | | |
| OTHER: | | OTHER: | | | |
| | | | give pertinent dates, including estir | | |
| of starting any proposed wo proposed completion or rec | | C. For Multiple Con | pletions: Attach wellbore diagram | of | |
| proposed completion of reev | Simpletion. | | | | |
| 3/26/12 - Talked to Maxey Brown w | | | | | |
| 3/27/12 - Rig up service unit, start to | | | | | |
| 3/28/12 – Continue to P/U tbg, tag C 3/28/12 – Spot 25sx class C 3061'-28 | IBP & cmt @ 4656', circulate 20sx 328' WOC & TAG | salt gel w/80 bbis E | 3/W, pressure test, casing held good. | | |
| 3/29/12 – Talked to Maxey Brown w | | equired tag. | | | |
| 3/29/12 – Spot 25sx class C 2019'-17 | | | | | |
| 3/29/12 – Spot 25sx class C 1357'-11 3/30/12 – Circulate 70sx class C 473 | | Appro | ved for plugging of well bore only. | 1 | |
| | | Liabili | ty under bond is retained pending receipt | | |
| | | of C-1 which | 03 (Subsequent Report of Well Plugging) may be found at OCD Web Page under | | |
| | · | Forma | , www.emnfd.state.nm.us/ded: | | |
| | | | | | |
| | | | | | |
| Spud Date: | Rig Release Da | te: | | | |
| L., | | | | | |
| I hereby certify that the information | boyd is true and complete to the be | st of my knowledge | and belief | | |
| $\mathcal{N}[\mathcal{A}]$ | | st of my knowledge | and benef. | | |
| SIGNATURE | | | | | |
| SIGNATURE | TITLE | Representative | DATE4/22/12 | | |
| Type or print nameMatthew Br | wer E-mail address | : <u>mbrewer01@</u> ke | venergy.com_ PHONE: _432-523-5 | 155 | |
| For State Use Only | | | | | |
| APPROVED BY | TITLE S | AFF N | Go DATE 4-25 | -2010 | |
| Conditions of Approval (if any): | | | UAIE 1-CS | -011 | |
| | | | | | |

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| | APR | 2.5 | 2012 |
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