

District I

1625 N French Dr, Hobbs, NM 88240

District II

1301 W. Grand Ave., Artesia, NM 88210

District III

1000 Rio Brazos Rd., Aztec, NM 87410

District IV

1220 S. St Francis Dr., Santa Fe, NM

87505

HOBBS OGD
MAY 21 2012

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-025-12286
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 WEST DOLLARHIDE DRINKARD UNIT
8. Well Number 64
9. OGRID Number 4323
10. Pool name or Wildcat DOLLARHIDE; TUBB DRINKARD
11. Elevation (Show whether DR, RKB, RT, GR, etc.)

SUNDRA 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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other INJECTOR	
2. Name of Operator CHEVRON U.S.A. INC.	
3. Address of Operator 15 SMITH ROAD, MIDLAND, TEXAS 79705	
4. Well Location Unit Letter I: 998 feet from the SOUTH line and 660 feet from the EAST line Section 31 Township 24S Range 38E 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: RETURN TO INJECTION W/CHART

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.

INJECTION LINE HAS BEEN REPAIRED.

05-15-2012: NOTIFIED NMOCED. RAN CHART. TEST TO 408 PSI FOR 30 MINUTES. MARK WHITAKER, NMOCED, WITNESSED TEST. (ORIGINAL CHART & COPY OF CHART ATTACHED).

RETURN WELL TO INJECTION. ✓

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 05-17-2012

Type or print name DENISE PINKERTON

E-mail address: leakejd@chevron.com

PHONE: 432-687-7375

For State Use Only

APPROVED BY:

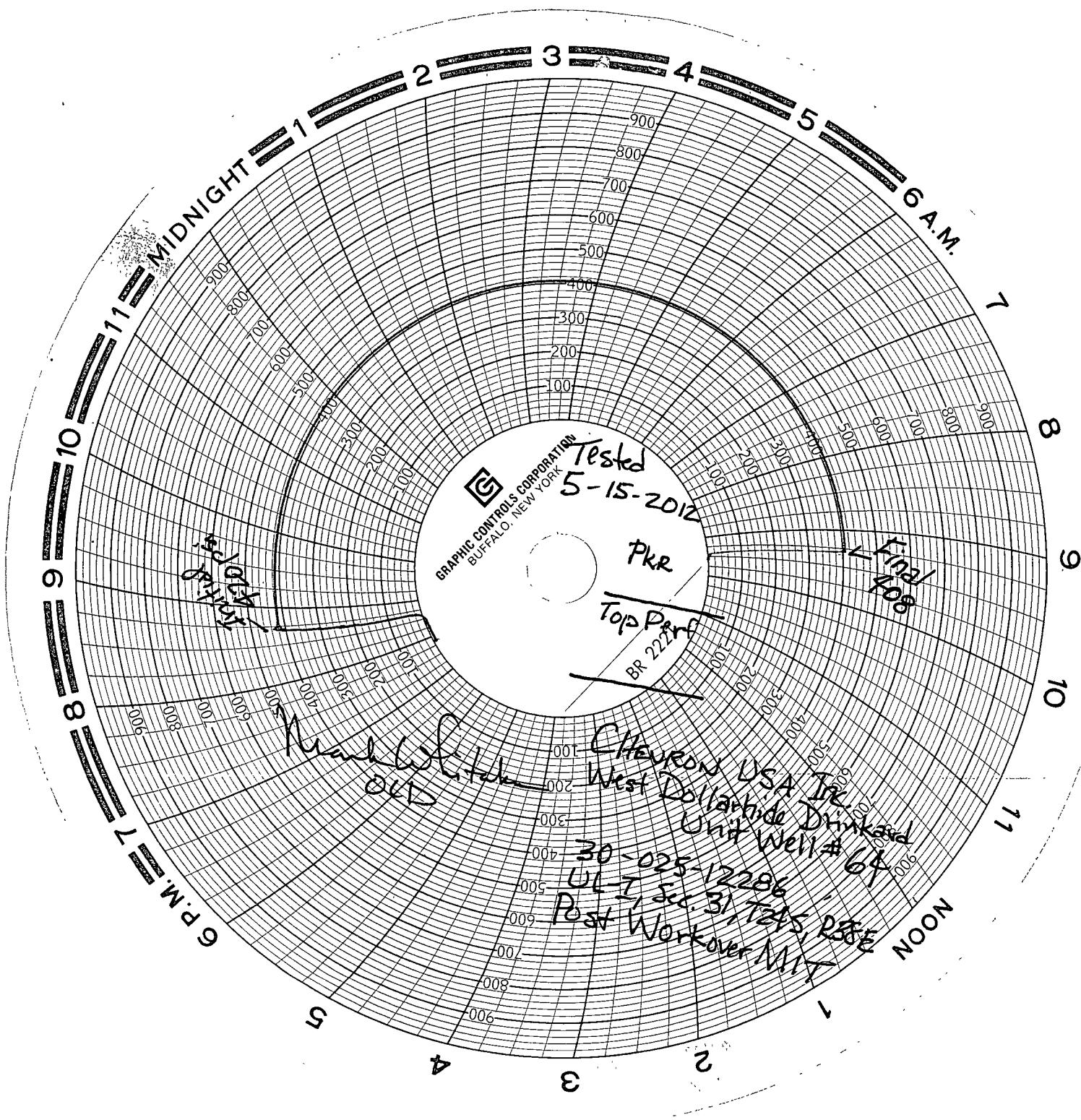
[Signature]

TITLE STAFF NGR

DATE 5-21-2012

Conditions of Approval (if any):

MAY 21 2012



GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK

Tested
5-15-2012

P.K.R.

Top Prod

BR 222nd

Final
408

Mark White
OCD

CHEVRON USA Inc
West Dolarbide Drinkard
Unit Well # 64
30-025-12286
UL-7, Sec. 3, T24S R28E
Post Workover M/T