Submit 1 Copy To Appropriate District Office	State of Frenchico		Form C-103	
District I				October 13, 2009
1625 N French Dr., Hobbs, NM 88240  District II  CONSERVATION DIVISION		WELL API NO. / 30-025-12293		
District II  District III  District III  1301 W. Grand Ave, Artesia, NM 88210  District III  1220 South St. Francis Dr.		5. Indicate Type of Leas		
District III 1000 Rio Brazos Rd, Aztec, NM 87410' 2 I 2012  1220 South St. Francis Dr. Santa Fe, NM 87505		STATE 6. State Oil & Gas Lease	FEE 🗵	
1220 S. St. Francis Dr., Santa Fe, NM		303	6. State Off & Gas Lease	e No.
SUNDRY NOT	IGES AND REPORTS ON WELLS		7. Lease Name or Unit A	Agreement Name
(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.)			WEST DOLLARHIDE DRINKARD / UNIT	
1. Type of Well: Oil Well  Gas Well  Other			8. Well Number 66	
2. Name of Operator CHEVRON U.S.A. INC.			9. OGRID Number 4323	
3. Address of Operator 15 SMITH ROAD, MIDLAND, TEXAS 79705			10. Pool name or Wildon DOLLARHIDE; TUBB	
4. Well Location				
Unit Letter K: 2312 f	eet from the SOUTH line and 230		EST 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: SUBSEQUENT REPORT OF:				
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WORK ☐ ALTERING CASING ☐				
TEMPORARILY ABANDON				
PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMENT JOB   DOWNHOLE COMMINGLE				
			,	
OTHER: EXTEND TA STATUS 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.				
05-15-2012: NOTIFIED NMOCD. RAN CHART. TEST CSG TO 545 PSI FOR 30 MINUTES. WITNESSED BY MARK WHITAKER, NMOCD.				
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CIBP SET @ 6173'		Thea	proval of Tempora	M >
TA STATUS EXTENDED FOR 1	YR.	Aflance	onment Expires 5	-15-2013
Spud Date:	Rig Release Da	te:		
I hereby certify that the information	above is true and complete to the be	st of my knowledge	è and helief	
- C		st of my knowledge	c and benef.	
SIGNATURE TITLE REGULATORY SPECIALIST DATE 05-17-2012				
Type or print name DENISE PIN For State Use Only	KERTON E-mail address: <u>leak</u>	ejd@chevron.com	PHONE: 4	432-687-7375
APPROVED BY:	TITLE ST	a some	3- DATE 5	-21-2012
Conditions of Approval (if any):				
	` <b>`</b>			/
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