Ene	State of New Mexico	Form C-103
District I - (575) 393-6161 HOBBS OCE	ergy, Minerals and Natural Resources	Revised August 1, 2011 WELL API NO.
District II – (575) 748-1283	. CONCEDIA TION DIVIGION	30-025-40861
District II – (575) 748-1283 811 S. First St., Artesia, NM 88210 AN 0 3 2013 District III – (505) 334-6178	L CUNSERVATION DIVISION	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410		STATE X FEE
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NMRECEIVED	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
87505	<u>.</u>	·
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.)		7. Lease Name or Unit Agreement Name MCCLOY RANCH 2 24 32 STATE COM
1. Type of Well: Oil Well X Gas Well	Other	8. Well Number 4H
2. Name of Operator Chevron USA, Inc.		9. OGRID Number
3. Address of Operator 15 Smith Road	:	10. Pool name or Wildcat
Midland, TX 79705		TRISTE DRAW; BONE SPRING (96603)
4. Well Location		TRIOTE DIATW, BOTTE OF RAITO (20003)
Unit Letter P : 100'	feet from the South line and 66	0' feet from the East line
Section 2	Township 24S Range 32E	NMPM County Lea
	vation (Show whether DR, RKB, RT, GR, etc	:.)
3606' (GR :	
12 (1 1 4		D (OIL D)
12. Check Appropri	ate Box to Indicate Nature of Notice	, Report or Other Data
NOTICE OF INTENTION	ON TO: SUE	SSEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG	AND ABANDON 🔲 REMEDIAL WOI	
		RILLING OPNS. P AND A
	PLE COMPL	NT JOB
DOWNHOLE COMMINGLE		
OTHER:	OTHER: Spud W	/ell 🗓
	ations. (Clearly state all pertinent details, a	nd give pertinent dates, including estimated date
of starting any proposed work). SEE proposed completion or recompletion	RULE 19.15.7.14 NMAC. For Multiple Con.	ompletions: Attach wellbore diagram of
On 12/31/2012, Spud in well with Tinidad	# 110 rig @ 0500 Hours	
	:	
Spud Date:	Rig Release Date:	
Spud Date:	Rig Release Date:	
		go and balisf
Spud Date: I hereby certify that the information above is t		ge and belief.
I hereby certify that the information above is t		ge and belief.
		ge and belief. DATE 01/01/2013
I hereby certify that the information above is to SIGNATURE By	rue and complete to the best of my knowled TITLE Regulatory Specialist II	DATE 01/01/2013
I hereby certify that the information above is t	rue and complete to the best of my knowled TITLE Regulatory Specialist II	DATE <u>01/01/2013</u>
I hereby certify that the information above is to SIGNATURE Bryan Arrant (Agent for Control of State Use Only)	TITLE Regulatory Specialist II Chevron) E-mail address: bryan.arrant@c	DATE 01/01/2013 hk.com PHONE: (405)935-3782
I hereby certify that the information above is to SIGNATURE Type or print name Bryan Arrant (Agent for Control State Use Only APPROVED BY:	rue and complete to the best of my knowled TITLE Regulatory Specialist II	DATE 01/01/2013 hk.com PHONE: (405)935-3782
I hereby certify that the information above is to SIGNATURE Bryan Arrant (Agent for Control of State Use Only)	TITLE Regulatory Specialist II Chevron) E-mail address: bryan.arrant@c	DATE 01/01/2013 hk.com PHONE: (405)935-3782