

Submit 1 Copy To Appropriate District  
Office  
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  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV - (505) 476-3460  
1220 S. St. Francis Dr., Santa Fe, NM  
87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
Revised August 1, 2011

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

WELL API NO. 30-025-05386
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Lovington San Andres Unit
8. Well Number: 18
9. OGRID Number: 241335
10. Pool name or Wildcat Lovington Grayburg San Andres

**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.)

1. Type of Well: Oil Well ☐ Gas Well ☒ Other Water Injection ☐

2. Name of Operator  
Chevron Midcontinent, L.P.

3. Address of Operator  
15 Smith Road Midland, TX 79705

4. Well Location  
Unit Letter L : 1980 feet from the South line and 330 feet from the West line  
Section 32 Township 16-S Range 37-E NMPM County Lea

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3811' GL

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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.

01-02-2013 - Todd C contacted OCD, lay down 146 joints  
1-08-13 - Set CIBP @ 4555' Tag CIBP Circulate 25 sks salt gel with 60 bbls B/W, Spot 25 sks cmt plug @ 4555' ROC  
4302' spot 25 sks @ 3111' TOC 2858'  
01-09-13 - Tag yesterday plug @ 2875' Perf & Sqz @ 2200' spot 30 sks @ 2278' TOC 1975' Tag plug @ 1900'  
Perf & Sqz @ 400' & Circ 100 sks to surface

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 [Signature] TITLE Representative DATE 02/11/2013

Type or print name Robert Holden E-mail address: rholden@keyenergy.com PHONE: 432-523-5155  
**For State Use Only**

APPROVED BY: [Signature] TITLE Dist Mgr DATE 2-14-2013  
Conditions of Approval (if any):

Approved for plugging of well bore only.  
Liability under bond is retained pending receipt of  
C-103 (Specifically for Subsequent Report of Well  
Plugging) which may be found at OCD web page  
under forms.  
www.emnrd.state.nm.us/ocd

FEB 14 2013