

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

HOBBS OCD
 MAY 15 2013

WELL API NO. 30-025-31553
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: 87
9. OGRID Number: 241333
10. Pool name or Wildcat Lovington Grayburg San Andres
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3846' GL

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 C : 2515 feet from the NORTH line and 1462 feet from the WEST line
 Section 1 Township 17-S Range 36-E NMPM County Lea

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

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

04-26-2013 - Martin L. contacted OCD, Tag CIBP @ 4498'
 04-30-2013 - Circulate 25 sks of salt gel spot 25 sks of cement @ 4498' TOC, 4251', spot 25 sks @ 3100' TOC @ 2853'
 Tag plug @ 2820', spot 25 sks of cement @ 2106' TOC @ 1859'
 05-01-2013 - Tag @ 1850' spot 25 sks of cement @ 1430' TOC 1183' Tag @ 1180' Perf @ 100' circulate cement to surface 40 sacks Finished Well

Spud Date:

Rig Release Date:

Approved for plugging of well bore only.
 Liability under bond is retained pending receipt of C-103 (Subsequent Report of Well Plugging) which may be found at OCD Web Page under Forms, www.emnrd.state.nm.us/oed.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE [Signature] TITLE Representative DATE 04/11/2013

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 5-16-2013

Conditions of Approval (if any)

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MAY 20 2013

[Handwritten initials]