

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

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

JUL 18 2013

WELL API NO. 30-025-10190	
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 BAKER "B"	
8. Well Number 10	
9. OGRID Number 4323	
10. Pool name or Wildcat EUNICE; SAN ANDRES, S	
4. Well Location Unit Letter: J 2310 feet from the SOUTH line and 1650 feet from the EAST line Section 10 Township 22S Range 37E 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: INTENT TO EXTEND TA STATUS *1 yr.*

OTHER:

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.

CHEVRON U.S.A. INC. RESPECTFULLY IS ASKING FOR A 1 YR TA STATUS RENEWAL FOR THE SUBJECT WELL. WE INTEND TO RECOMPLETE THE WELL TO THE GRAYBURG RESERVOIR IN THE NEAR FUTURE. THE CURRENT TA EXPIRES ON 08/30/2013.

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: 07/17/2013

Type or print name: DENISE PINKERTON

E-mail address: [leakejd@chevron.com](mailto:leakejd@chevron.com)

PHONE: 432-687-7375

**For State Use Only**

APPROVED BY:

*[Signature]*

TITLE:

*Dist. Mgr*

DATE:

*7-22-2013*

Conditions of Approval (if any):

JUL 24 2013