

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

Form C-103  
 Revised July 18, 2013

HOBBBS OGD  
 DEC 13 2013  
 RECEIVED

<p style="text-align: center;"><b>SUNDRY NOTICES AND REPORTS ON WELLS</b>          (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.)</p> <p>1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other INJ <input type="checkbox"/></p> <p>2. Name of Operator          CHEVRON USA INC <i>Child Continent L.P.</i></p> <p>3. Address of Operator          15 SMITH RD, MIDLAND, TX 79705</p> <p>4. Well Location          Unit Letter <u>M</u> : <u>660</u> feet from the <u>SOUTH</u> line and <u>614</u> feet from the <u>WEST</u> line          Section <u>6</u> Township <u>17S</u> Range <u>37E</u> NMPM County <u>LEA</u></p> <p>11. Elevation (Show whether DR, RKB, RT, GR, etc.)</p>	<p>WELL API NO.          30-025-05407</p> <p>5. Indicate Type of Lease          STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/></p> <p>6. State Oil &amp; Gas Lease No.</p> <p>7. Lease Name or Unit Agreement Name          LOVINGTON PADDOCK UNIT</p> <p>8. Well Number <u>70</u></p> <p>9. OGRID Number          4323</p> <p>10. Pool name or Wildcat          LOVINGTON PADDOCK</p>
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12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

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

ANNUAL MIT CHART

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 *Cindy Herrera-Murillo* TITLE PERMITTING SPECIALIST DATE 12/11/2013

Type or print name CINDY HERRERA MURILLO E-mail address: Cherreramurillo@chevron.com PHONE: 575-263-0431

**For State Use Only**

APPROVED BY: \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

Conditions of Approval (if any): *MSB 12/27/2013*

JAN 13 2014

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