

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

HOBBS OGD

DEC 19 2013

RECEIVED

CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

WELL API NO.

30-025-05375

5. Indicate Type of Lease

STATE FEE

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

LOVINGTON PADDOCK UNIT

8. Well Number 34

9. OGRID Number

4323

10. Pool name or Wildcat

LOVINGTON PADDOCK

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 INJ

2. Name of Operator

CHEVRON USA INC

Child Contract S.P.

3. Address of Operator

15 SMITH RD, MIDLAND, TX 79705

4. Well Location

Unit Letter I : 1930 feet from the SOUTH line and 660 feet from the EAST line

Section 31 Township 16S 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

CLOSED-LOOP SYSTEM

OTHER:

SUBSEQUENT REPORT OF:

REMEDIAL WORK ALTERING CASING

COMMENCE DRILLING OPNS. P AND A

CASING/CEMENT JOB

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.

ANNUAL MIT CHART

Spud Date:

[Empty box for Spud Date]

Rig Release Date:

[Empty box for 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

FOR RECORD ONLY

APPROVED BY: [Signature] TITLE _____ DATE _____

Conditions of Approval (if any):

JAN 26 2014

[Handwritten initials]

