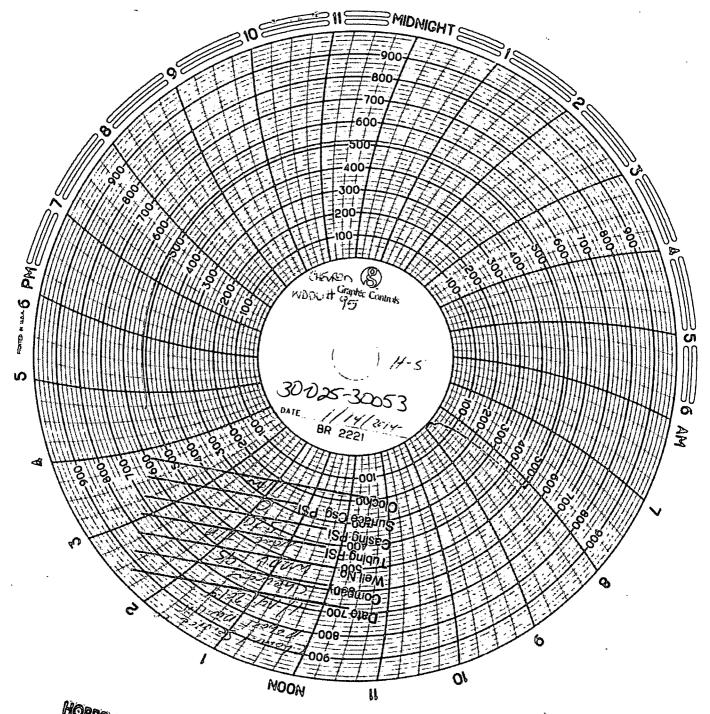
| Submit 1 Copy To Appropriate District | State of New Mexico | | Form C-103 |
|---|----------------------------|----------------------------|--------------------------------------|
| <u>District I</u> – (575) 393-6161 | y, Minerals and Natural Re | esources | Revised July 18, 2013 |
| Office <u>District I</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283 | | | WELL API NO. 30-025-30053 |
| 811 S. First St., Artesia, NM 88210 | ACONSERVATION DIV. | ISION | 5. Indicate Type of Lease |
| District III – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410 | 1220 South St. Francis D | Or. | STATE FEE |
| District IV = (505) 476-3460 | Santa Fe, NM 87505 | | 6. State Oil & Gas Lease No. |
| 1220 S. St. Francis Dr., Santa Fe, NM 87505 | J 9 | | |
| SUNDRY NOTICES AND | REPORTS ON WELLS | | 7. Lease Name or Unit Agreement Name |
| (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.) | | W DOLLARHIDE DRINKARD UNIT | |
| 1. Type of Well: Oil Well Gas Well | Other | | 8. Well Number 95 |
| 2. Name of Operator | | | 9. OGRID Number |
| CHEVRON USA INC | | | 4323 10. Pool name or Wildcat |
| 3. Address of Operator 15 SMITH RD, MIDLAND, TX 79705 | | | DOLLARHIDE TUBB DRINKARD |
| 4. Well Location | | | |
| Unit Letter C: 75 feet from the NORTH line and 1410 feet from the WEST line | | | |
| Section 32 Township 24S Range 38E NMPM County LEA | | | |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) | | | |
| | | | |
| | | | |
| 12. Check Appropria | te Box to Indicate Nature | of Notice, I | Report or Other Data |
| NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: | | | |
| | | | _ |
| | | | |
| | LE COMPL CAS | ING/CEMENT | JOB |
| DOWNHOLE COMMINGLE | | | |
| CLOSED-LOOP SYSTEM OTHER: | □ ОТН | IER: TA STA | TUS WITH MIT CHART |
| 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. | | | |
| | | | |
| | | | |
| 01/14/2014 TEST CASING TO 520 PSI FOR 30 MINUTES ORIGINA CHART IS ATTACHED. | | | |
| WELL IS TEMPORIRILY ABANDONED. | | | |
| | | | |
| | | | |
| This Approval of Temporary | | | |
| This Approval of Temporary 1/14/2015 Abandonment Expires | | | |
| | | | |
| | | | |
| | | | |
| Spud Date: | Rig Release Date: | | |
| · | | | |
| | | | |
| I hereby certify that the information above is true and complete to the best of my knowledge and belief. | | | |
| \wedge , | | | |
| SIGNATURE (indy Henry - Murillo TITLE PERMITTING SPECIALIST DATE 01/15/2014 | | | |
| \mathcal{L} | | | |
| Type or print name <u>CINDY HERRERA-MURILLO</u> E-mail address: <u>Cherreramurillo@chevron.com</u> PHONE: <u>575-263-0431</u> | | | |
| For State Use Only | | | |
| APPROVED BY: Maleuthrown TITLE Compliance Office DATE 1/15/2014 Conditions of Approval (if any): APPROVED BY: Maleuthrown TITLE Compliance Office DATE 1/15/2014 | | | |
| Conditions of Approval (if any): | | | |
| V | - | • | - JAN B. J. LUIT |



HOBBS OCD

JAN 1 5 20141

RECEIVED