

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 July 18, 2013

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

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.)		WELL API NO. 3002505406
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other Injector <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator <b>CHEVRON MIDCONTINENT, L.P.</b>		6. State Oil & Gas Lease No.
3. Address of Operator <b>15 SMITH ROAD MIDLAND, TX 79705</b>		7. Lease Name or Unit Agreement Name <b>LOVINGTON SAN ANDRES UNIT</b>
4. Well Location Unit Letter <b>B</b> : <b>660</b> feet from the <b>NORTH</b> line and <b>2040</b> feet from the <b>EAST</b> line Section <b>6</b> Township <b>17-S</b> Range <b>37-E</b> NMPM County <b>LEA</b>		8. Well Number <b>36</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. OGRID Number
10. Pool name or Wildcat <b>SAN ANDRES</b>		

HOBBS OCD  
 AUG 06 2014  
 RECEIVED

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: **ANNUAL MIT TEST**

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 HAS CONDUCTED THE ANNUAL MIT TEST ON THE ABOVE WELL. CHART ATTACHED.**

**\*\*PLEASE NOTE THIS TEST IS FOR UIC ANNUAL TESTING\*\***

Spud Date:

Rig Release Date:

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

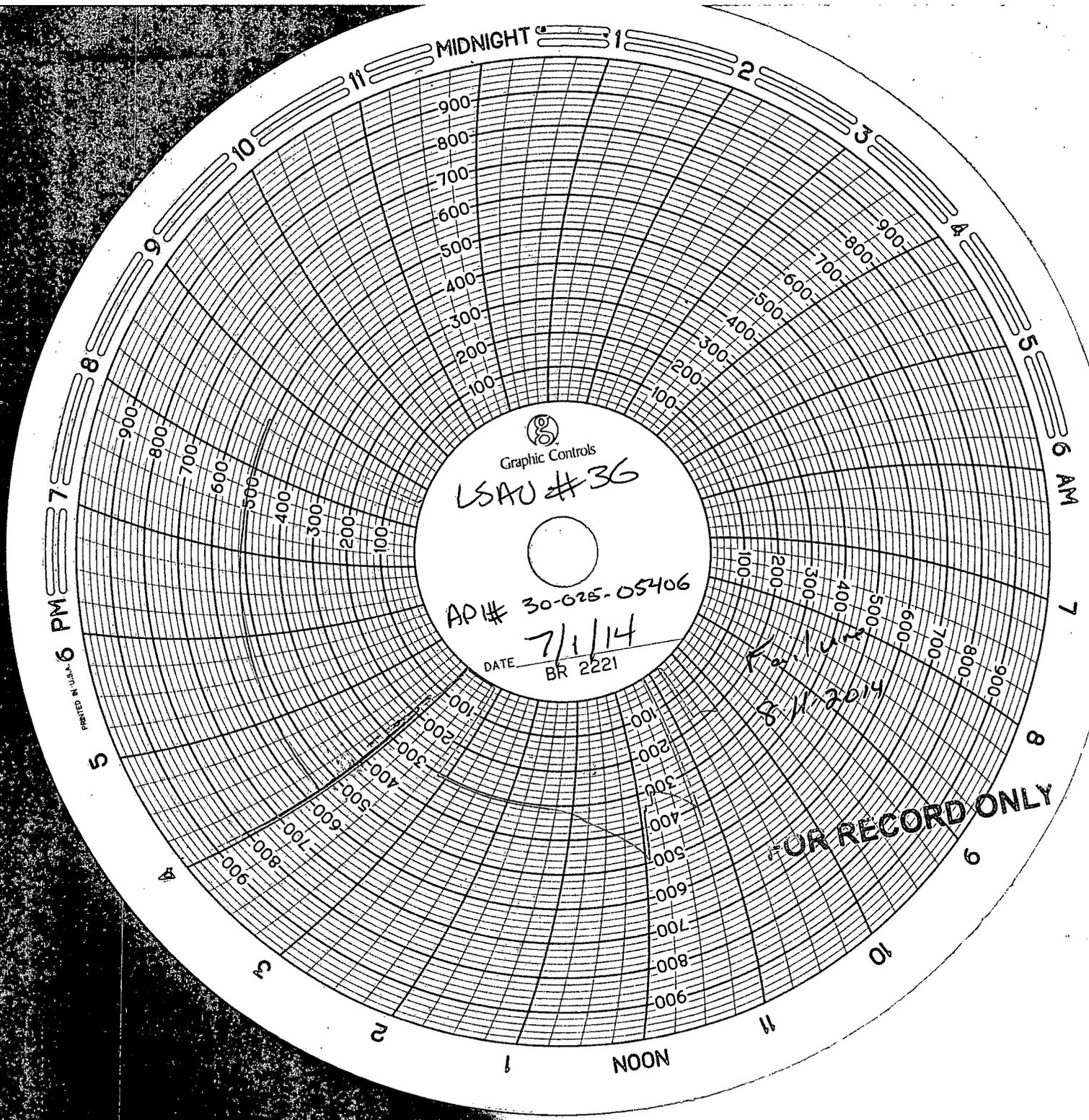
SIGNATURE: A.P. Garcia TITLE: **REGULATORY ASSISTANT** DATE: 7/11/2014

Type or print name: **Adriann Garcia** E-mail address: **Adriann.Garcia@chevron.com** PHONE: **432-687-7617**

For State Use Only

APPROVED BY: Bill Samama TITLE: Staff Manager DATE: 8/11/2014  
 Conditions of Approval (if any):

AUG 18 2014



MIDNIGHT

Graphic Controls

LSAU #36

AD # 30-025-05406

DATE 7/1/14  
BR 2221

FOR RECORD ONLY

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