Submit 1 Copy To Appropriate District	State of New Mexico.		Form C-103
Office <u>District 1</u> – (575) 393-6161	Energy, Minerals and	Natural Resources	Revised July 18, 2013
1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283			WELL API NO.
811 S. First St., Artesia, NM 88210	OIL CONSERVAT		3002503811
<u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St		5. Indicate Type of Lease  STATE   FEE   □
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM	Santa Fe, N	M 8/505	6. State Oil & Gas Lease No.
87505			B2359
(INC. NOT LICE THIS ECODAL ECOD DECIDES	CES AND REPORTS ON W	OD DI LIC DACK TO A	7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPLIC PROPOSALS.)  1. Type of Well: Oil Well	ATION FOR PERMIT" (FORM C-	TOTA ECOD CITICIANO	LOVINGTON SAN ANDRES UNIT
PROPOSALS.)	Gas Wall Y Other Injector	UOBBS	8. Well Number 41
		6 3014	
2. Name of Operator		HOBBS 0 6 5014	9. OGRID Number
CHEVRON MIDCONTINENT, L.P.	····	AC STED	LO D. I. WILL
3. Address of Operator  15 SMITH ROAD MIDLAND, TX 79	705	RECEIVED	10. Pool name or Wildcat  LOVINGTON GRAYBURG SAN ANDRES
4. Well Location	703		BOVENOTON GREET BERG BILL IN BRES
Unit Letter_G _:_1980 _feet from the _NORTH _ line and _1980 _feet from the _EAST _line			
Section 1 Township 17-S Range 36-E 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: SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK   PLUG AND ABANDON   REMEDIAL WORK			
TEMPORARILY ABANDON			
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMEN	NT JOB
DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM			
CLOSED-LOOP \$YSTEM  OTHER:		OTHER: ANNU	AL 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**			
** LEAGE NOTE THIS TEST IS FOR SIG ARROAD FESTING**			
Spud Date:	Rig Rele	ase Date:	1
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
Thereby certify that the information a	bove is true and complete to	the best of my knowled	ge and benef.
·			
SIGNATURE:			
Type or print name: Adriann Garcia E-mail address: Adriann.Garcia@chevron.com PHONE: 432-687-7617			
For State Use Only			
For State Use Only  APPROVED BY: Sel Somanah TITLE Staff Manager DATE 8/11/2019  Conditions of Approval (if any):  AUG 1 9 2014			
Conditions of Approval (if any):			
		1	AUG 1 9 2014

