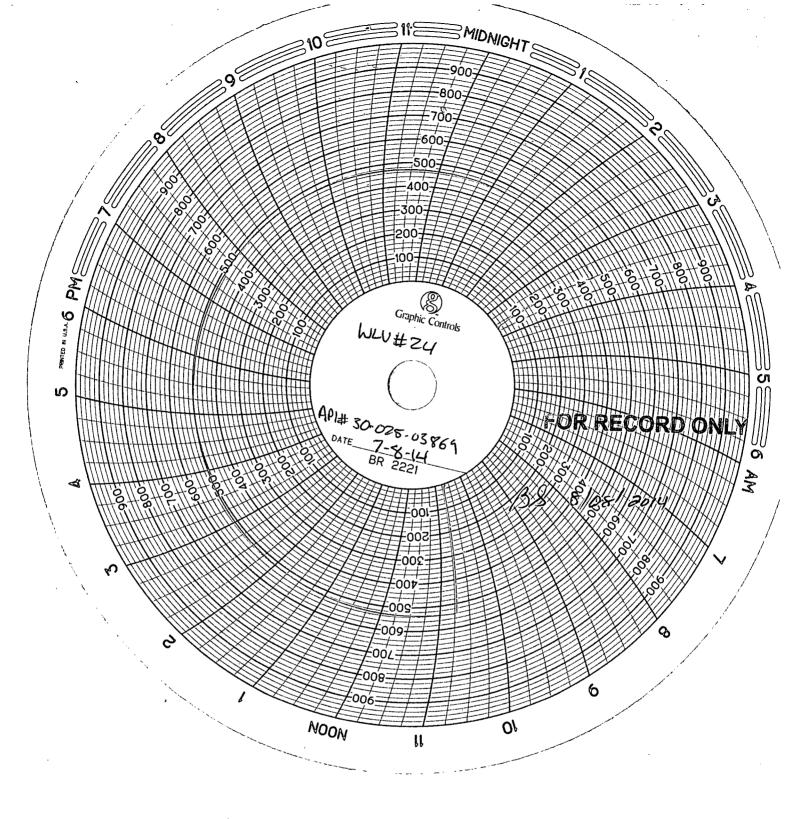
Submit I Copy To Appropriate District Office	State of New Mexico	Form C-103
<u>District I</u> - (575) 393-6161	Energy, Minerals and Natural Resource	es Revised July 18, 2013 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283	OH CONGERNATION DIVIGION	
811 S. First St., Artesia, NM 88210 District III – (505) 334-6178	OIL CONSERVATION DIVISION	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.	STATE FEE
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
87505		
SUNDRY NOT (DO NOT USE THIS FORM FOR PROPODIFFERENT RESERVOIR. USE "APPLIPROPOSALS.)	CICES AND REPORTS ON WELLS OSALS TO DRILL OR TO DEEPEN OR PLUG BACK OF CATION FOR PERMIT" (FORM C-101) FOR DEFI	7. Lease Name or Unit Agreement Name WEST LOVINGTON UNIT
1. Type of Well: Oil Well	Gas Well X Other Injector	8. Well Number 24
2. Name of Operator	Nill o	9. OGRID Number 241333
CHEVRON MIDCONTINENT, L.P.		NED
3. Address of Operator	B. v. co.	10. Pool name or Wildcat
15 SMITH ROAD MIDLAND, TX 7	9705	LOVINGTON SAN ANDRES WEST
4. Well Location		
	eet from the _SOUTH _ line and _1980 _feet from	
Section 4 Township 17-S Range 36-E NMPM County LEA		
	11. Elevation (Show whether DR, RKB, RT, G 3902' KB	R, etc.)
	3702 KB	
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 COMMENCE DRILLING OPNS. P AND A DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM		
OTHER:	OTHER: A	NNUAL 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:		
Type or print name: Adriann Garcia E-mail address: Adriann.Garcia@chevron.com PHONE: 432-687-7617		
For State Use Only		
APPROVED BY: Bill Servamah TITLE Statt Managa DATE 8/08/2014 Conditions of Approval (if any):		
Conditions of Approval (it ally).		



W