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	
625 N. French Dr., Hobbs, NM 88240 istrict II = (575) 748-1283		WELL API NO.		
811 S. First St., Artesia, NM 88210	sia, NM 88210 OIL CONSERVATION DIVISION		3002503881 5. Indicate Type of Lease	
<u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.		STATE S 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 NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACKTO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUPPROPOSALS.)			7. Lease Name or Unit Agreement Name WEST LOVINGTON UNIT	
1. Type of Well: Oil Well			8. Well Number 33	
2. Name of Operator	- //	10 0 % 50.	9. OGRID Number 4323	
			3. OSIND 1.4.1.1.501	
3. Address of Operator		RECENED	10. Pool name or Wildcat	
15 SMITH ROAD MIDLAND, TX	79705	9 -	LOVINGTON UPPER SA WEST	
4. Well Location				
Unit Letter_ P_ :_ 660 _fe	eet from the _SOUTH _ line and _ 66	60_feet from the _1	EAST_line	
Section 5 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: PERFORM REMEDIAL WORK PLUG AND ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PAND A CASING COMMENCE DRILLING OPNS. PAND A CASING/CEMENT JOB CASING/CEMENT JOB COMMENCE DRILLING OPNS. OTHER: ANNUAL MIT TEST				
OTHER:		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	n above is true and complete to the bo	est of my knowled	ge and belief.	
		·	,	
SIGNATURE: 4	TITLE: REC	GULATORY ASS	ISTANT DATE:7/16/2014	
Type or print name: Adriann Garcia E-mail address: Adriann.Garcia@chevron.com PHONE: 432-687-7617				
For State Use Only				
D				
APPROVED BY: /Sill 🗸	sowanah TITLE St	att Mano	9e DATE 8/08/2014	
For State Use Only APPROVED BY: Bill Sawarah TITLE Stiff Manage DATE 8/08/2014 Conditions of Approval (if any):				

FOR RECORD ONLY

AUG 19 2014

