

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

HOBBS OCD
 DEC 01 2014
 RECEIVED

WELL API NO. 30-025-42168
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/> FED X
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name MOOSE'S TOOTH 29 26 33 FED COM
8. Well Number #1H
9. OGRID Number 4323
10. Pool name or Wildcat WC-025 G-06 9263319P; BS

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.)

1. Type of Well: Oil Well Gas Well Other

2. Name of Operator
CHEVRON USA INC

3. Address of Operator
1616 W. BENDER BLVD HOBBS NM 88240

4. Well Location
 Unit Letter D : 200' feet from the NORTH line and 330' feet from the WEST line
 Section 29 Township 26S Range 33E NMPM County LEA

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3203'

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: CHANGE DESIGNATED POOL <input checked="" type="checkbox"/>	

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.

WC-025 G-06 9263319P; BONE SPRING

CHEVRON USA INC REQUESTS THAT THE ~~BRADLEY~~; BONE SPRING POOL (7280) BE THE DESIGNATED POOL FOR OUR APPROVED APD FOR MOOSE' TOOTH 29 26 33 FEDERAL COM #1H WELL.

AMENDED C-102 IS ATTACHED.

E-PERMITTING

P&A NR _____ P&A R _____

INT to P&A _____

CSNG _____ CHG Loc _____

TA _____ *Add Pool do*

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 Cindy Herrera-Murillo TITLE PERMITTING SPECIALIST DATE 11/25/2014

Type or print name CINDY HERRERA-MURILLO E-mail address: Cherreramurillo@chevron.com PHONE: 575-263-0431

For State Use Only

APPROVED BY: [Signature] TITLE Petroleum Engineer DATE 12/5/14
 Conditions of Approval (if any): _____

DEC 05 2014