Submit 1 Copy To Appropriate District Office	State of Nev	v Mexico	Form C-103
District I - (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. 30-025-31288
811 S. First St., Artesia, NM 88210	OIL CONSERVAT		5. Indicate Type of Lease
District III – (505) 334-6178	1220 South St.	Francis Dr.	STATE FEE
1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> – (505) 476-3460	Santa Fe, N	M 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505			
	ICES AND REPORTS ON W	ELLS	7. Lease Name or Unit Agreement Name
(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.)			LOVINGTON PADDOCK UNIT
1. Type of Well: Oil Well	Gas Well 🔲 Other	HOBBS OCD	8. Well Number 112
2. Name of Operator			9. OGRID Number 241333
CHEVRON MIDCONTINENT, I	<u>л.Р</u>	MAY 0 4 2015	10.00
 Address of Operator SMITH ROAD, MIDLAND, 	FFYAS 70705	py 14 1 1 -	10. Pool name or Wildcat
	-	menell/Ell	
4. Well Location Unit Letter: K feet from S line and feet from the line			
			NIMBM C . I EA
Section 31	Township 16S 11. Elevation (Show whether	Range 37E	NMPM County LEA
		T DR, RRB, RT, GR, etc	
12. Check	Appropriate Box to Indica	nte Nature of Notice	, Report or Other Data
	VD INJEGTIONS		BSEQUENT REPORT OF:
PE E-PERMITTING <sv< td=""><td></td><td>REMEDIAL WOL</td><td>-</td></sv<>		REMEDIAL WOL	-
PU DETURN TO	RBDM8 (ALL)	CASING/CEMEN	RILLING OPNS. P AND A
DO RETURN TO	TA (Pm.) CHG LOC	, OASING/OLIVILI	VI 30B
CIC CSNG			
OTI INT TO PAP&A NRP&A ROTHER: TA STATUS W/CHART			
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.			
I I			
04/24/2015: NOTIFIED NMOCD. RAN CHART. PRESS TO 540 PSI FOR 32 MINUTES. (COPY OF CHART ATTACHED)			
WITNESSED BY MAXEY BROWN, NMOCD.			
WELL IS TEMPORARILY ABANDONED. This Approval of Temporary, Abandon mont Expires 4/24/2018			
Abandonment Expires 4/24/2018			
Spud Date:	Rig Relea	ise Date:	
		.	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
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signaturé <u>Valual y v</u>	TITLE	REGULATORY SPEC	IALIST DATE 04/29/2015
The state of the s			
Type or print name DENISE PINKERTON E-mail address: <u>leakejd@chevron.com</u> PHONE: 432-687-7375 For State Use Only A O			
M. I WH.			
APPROVED BY: Y Calcul Down TITLE Old. Sufficiency DATE 3/4/2015			
Conditions of Approval (if any):			
V			
			Λ

MAY 0 7 2015

