

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

WELL API NO. 30-025-12365
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name MEXICO L
8. Well Number 001
9. OGRID Number 4323
10. Pool name or Wildcat DOLLARHIDE; FUSSELMAN

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 SWD

CHEVRON U.S.A. INC. AUG 31 2015

3. Address of Operator
15 SMITH RD MIDLAND TX 79705 RECEIVED

4. Well Location
 Unit Letter: A 660 feet from the NORH line and 660 feet from the EAST line
 Section 5 Township 25S Range 38E 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 <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: REPAIR AND OBTAIN PASSING CHART <input type="checkbox"/>		OTHER: <input 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.

CHEVRON U.S.A. INC. INTENDS TO REPAIR THE WELL & RETURN TO INJECTION:
 PROPOSED PLAN IS TO TEST CASING FOR LEAKS,
 CEMENT SQUEEZE LEAKS IF NEEDED,
 REPLACE INJECTION PACKER,
 REPLACE TUBING AS NEEDED,
 OBTAINING A PASSING CHART,
 AND RETURN WELL TO INJECTION.

**The Oil Conservation Division
 MUST BE NOTIFIED 24 Hours
 Prior to the beginning of operations**

**Condition of Approval: notify
 OCD Hobbs office 24 hours
 prior of running MIT Test & Chart**

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 *Dorian K Fuentes* TITLE: REGULATORY SPECIALIST DATE: 08/19/2015
 Type or print name DORIAN K. FUENTES E-mail address: DJVO@CHEVRON.COM PHONE: 432-687-7631

For State Use Only
 APPROVED BY: *Mary Brown* TITLE *Dist Supervisor* DATE *9/1/2015*
 Conditions of Approval (if any)

SEP 02 2015

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