Submit 3 Copies To Appropriate District Office	State of N	ew Mexico		Form C-103
District I	Energy, Minerals as	nd Natural Resources		May 27, 2004
1625 N. French Dr., Hobbs, NM 88240			WELL API NO.	0.025 204.2
District II 1301 W. Grand Ave., Artesia, NM 88210			30-025- 334 13 5. Indicate Type of Lease	
District III	istrict III 1220 South St. Francis Dr.			FEE 🗆
1000 Rio Brazos Rd., Aztec, NM 87410 District IV Santa Fe, NM 87505		6. State Oil & Gas Lease		
1220 S. St. Francis Dr., Santa Fe, NM 87505	,			B-9519
SUNDRY NOTI	CES AND REPORTS ON		7. Lease Name or Unit A	greement Name
(DO NOT USE THIS FORM FOR PROPOS	SALS TO DRILL OR TO DEEPE	N OR PLUG BACK TO A		
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)			WEST DOLLARHIDE DRI	
1. Type of Well: Oil Well Gas Well Other WATER INJECTION WELL			8. Well Number	156
2. Name of Operator CHEVRON USA INC			9. OGRID Number	4323
3. Address of Operator			10. Pool name or Wildcat	
15 SMITH ROAD, MIDLAND, TEXAS 79705			DOLLARHIDE TUBB DRINKARD	
4. Well Location				
<u> </u>	2000 feet from the	South line and 1	200 feet from the	EAS7 line
Section 32		S Range 38-E	NMPM LEA Count	
Section		ther DR, RKB, RT, GR, etc.,		
		3164'		
Pit or Below-grade Tank Application 🔲 o	r Closure			
Pit typeDepth to Groundw	aterDistance from near	est fresh water well Dist	tance from nearest surface water	•
Pit Liner Thickness: mil	Below-Grade Tank: Volu	me bbls; Co	onstruction Material	
12. Check A	Appropriate Box to Ind	icate Nature of Notice,	Report or Other Data	
			_	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING				
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND A				
PULL OR ALTER CASING	MULTIPLE COMPL	☐ CASING/CEMEN	T JOB 📙	
OTHER:		☐ OTHER: TEMP	ORARY ABANDONMENT	міт 🗆
13. Describe proposed or comp	leted operations. (Clearly	state all pertinent details, an	d give pertinent dates, inclu	ding estimated date
of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion				
or recompletion.				
Zero Raze =	Injection wo	eu. Tempore	ery Abendonm	407
		10/0-/05	, J	
mechanical in	itegrity Tes	m. 10/25/05		
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1110 Apploval of Temporary				
	Andridoumer	it Expires	21/2010	**/
		7	1191816161	,
	• .		The said of Parties	
I house, contify that the information	ahove is two and complet	a to the heet of my knowledge	re and helief I further series	that any nit or helow.
I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan.				
	}			
SIGNATURE Jan	<u>/\</u> 7	TITLE Operation 9	Supervisor DAT	E15-9-02
Tala	d	•	•	432 1e No. 523-3655
Type or print name For State Use Only	ソ	E-mail address:	1 elebiion	ex7, 7613
TOI State Use Only	ratio oct	ISTRICT SUPERVISOR/GEN	VERAL MANAGER	
APPROVED BY:	////am	TITLE	DAT	DEC 1 5 2005

