

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.	30-025-25253
5. Indicate Type of Lease	STATE FEE X
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name	CENTRAL DRINKARD UNIT
8. Well Number	415
9. OGRID Number	4323
10. Pool name or Wildcat	DRINKARD

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 **X WATER INJECTION**

2. Name of Operator
CHEVRON U.S.A. INC.

3. Address of Operator
1500 SMITH RD. MIDLAND, TX. 79705

4. Well Location **GPS Y-LAT 32.44868 X-LONG -103.16312**
Unit Letter **I**: **2212** feet from the **SOUTH** line and **1146** feet from the **EAST** line
Section **28** Township **21-S** Range **37-E** NMPM County **LEA**

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3,428' GL

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

E-PERMITTING <SWD INJECTION> CONVERSION <input type="checkbox"/> RBDMS <input type="checkbox"/> RETURN TO <input type="checkbox"/> TA <input type="checkbox"/> CSNG <input type="checkbox"/> ENVIRO <input type="checkbox"/> CHG LOC <input type="checkbox"/> INT TO PA <input type="checkbox"/> P&A NR <input checked="" type="checkbox"/> P&A R <input type="checkbox"/> OTHER: <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input checked="" type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: <input type="checkbox"/>
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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. **8 5/8" 24# @ 1,215' TOC SURF, 5 1/2" 15.5# @ 6,498' TOC SURF, DV TOOL @ 1,214', PERFS 6,498'-6,506', CMT. RET. @ 6,526', PERFS 6,376'-6,425', CIBP @ 6,327' W/ 35' CMT.**

10/13/15 MOVE IN RIG & CMT EQUIPMENT, ND TREE, NU BOP & TEST, RIH W/ TBG TO TAG CIBP @ 6,303', TEST CSG 500 PSI GOOD.

10/14/15 MIX & SPOT 30 SX CL "C" CEMENT FROM 6,302'-6,000', WOC & TAG 6,020', MIX & SPOT 80 SX CL "C" CEMENT FROM 5,490'-4,700', MIX & SPOT 90 SX CL "C" CEMENT FROM 3,919'-3,030', MIX & SPOT 80 SX CL "C" CEMENT FROM 2,887'-2,097'.

10/15/15 MIX & SPOT 50 SX CL "C" CEMENT FORM 1,312'-818', WOC & TAG @ 886'. PERF 5 1/2" @ 100'. MIX & CIR 70 SX CL "C" CEMENT FROM 100' BACK TO SURFACE ON BOTH STRINGS. CUT ALL CASING & ANCHORS & REMOVED 3' BELOW GRADE. WELD ON DRY HOLE MARKER. CLEAN LOCATION. **ALL CEMENT PLUGS CLASS "C", W/ CLOSED LOOP SYSTEM USED.**

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 [Signature] TITLE Agent for Chevron U.S.A. DATE 10/16/15
Type or print name Monty L. McCarver E-mail address: monty.mccarver@cjes.com PHONE: 713-325-6288

For State Use Only
APPROVED BY: [Signature] TITLE Dist Supervisor DATE 10/20/2015
Conditions of Approval (if any): [Signature]

OCT 20 2015