

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. 30-025-05982
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name USA BERTHA J BARBER
8. Well Number 019
9. OGRID Number 4323
10. Pool name or Wildcat Monument Paddock MONUMENT PADDOCK
11. Elevation (Show whether DR, RKB, RT, GR, etc.)

**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 U.S.A. INC.

3. Address of Operator  
15 SMITH ROAD, MIDLAND, TEXAS 79705

4. Well Location  
 Unit Letter: I 2310 feet from SOUTH line and 330 feet from the EAST line  
 Section 7 Township 20S Range 37E NMPM County LEA

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

HOBBSD  
 OCT 26 2015  
 RECEIVED

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

<b>E-PERMITTING &lt;SWD INJECTION&gt;</b> CONVERSION _____ RBDMS <u>MB</u> <input type="checkbox"/> RETURN TO _____ TA <u>P.M.</u> <input type="checkbox"/> CSNG _____ ENVIRO _____ CHG LOC _____ <input type="checkbox"/> INT TO PA _____ P&A NR _____ P&A R _____ <input type="checkbox"/>	<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER TA EXTENSION W/ CHART <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.

10/20/2015: NOTIFIED NMOCD. RAN CHART. PRESS TO 550 PSI FOR 32 MINUTES. (COLOR COPY OF CHART ATTACHED). WITNESSED BY NMOCD.

*This Approval of Temporary Abandonment Expires 10/20/2016*

Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

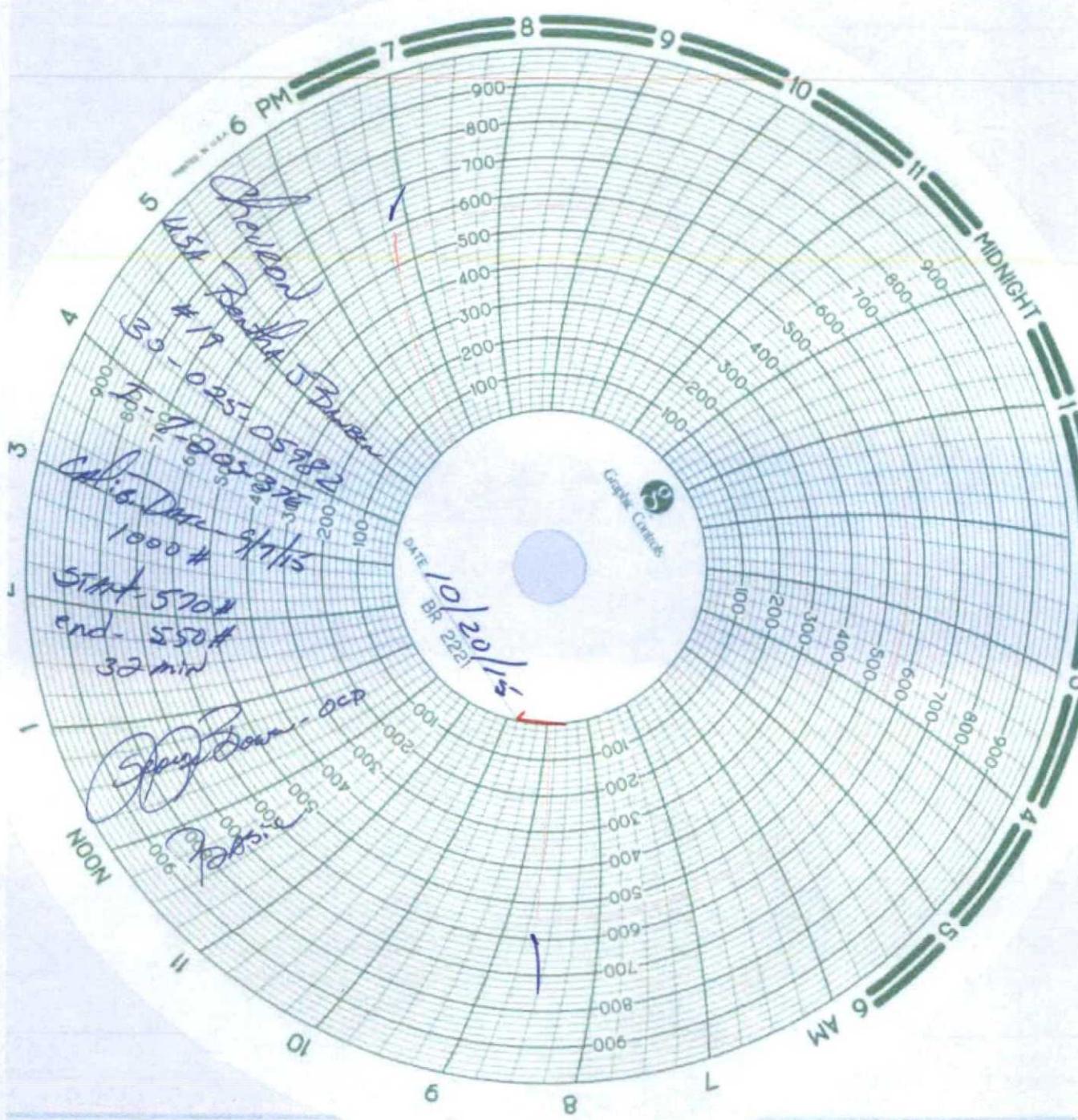
SIGNATURE Denise Pinkerton TITLE REGULATORY SPECIALIST DATE 10/22/2015

Type or print name DENISE PINKERTON E-mail address: [leakejd@chevron.com](mailto:leakejd@chevron.com) PHONE: 432-687-7375  
 For State Use Only

APPROVED BY: Mary Brown TITLE Dist Supervisor DATE 10/27/2015  
 Conditions of Approval (if any):

OCT 27 2015

*MB*



*Johnson*

*USA Bank*

*# 19*

*025-05982*

*Calis Data 9/1/15*

*1000 #*

*start- 570 #*

*end- 550 #*

*32 min*

DATE *10/20/15*  
BR *2221*

*Spence*

*10/20/15*