

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. 30-025-12293
5. Indicate Type of Lease STATE X FEE
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name WEST DOLLARHIDE DRINKARD UNIT
8. Well Number 66
9. OGRID Number 4323
10. Pool name or Wildcat DOLLARHIDE TUBB DRINKARD
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 Injection

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

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

4. Well Location
 Unit Letter: K 2312 feet from the SOUTH line and 2309 feet from the WEST line
 Section 31 Township 24 S Range 38E NMPM County LEA

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK	X 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:		OTHER: Obtained Passing MIT	

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.

12/10/2015: RU pump & Pulling Unit, Check well pressure 575 held 30mins good, test blind rams 300 low 550 high held good
 12/14/2015: PU & RIH w/2nd attempt RBP psi held @ 500 good, hot work, well control, INSP equipment tested 2000psi for 20mins good.
 12/15/2015: PU & RIH w/TST hangar & set, chart blind rams 300 psi low/500 psi high held 5mins each good PU Ret tool, RIH w/22 JTs 2-7/8 release RBP
 12/16/2015: PU 4-3/4 BHA Tag TOC @ 6130, DO CMT & CIBP good returns, 12/17/2015: Cont DO CMT & CIBP good returns, PU CIRC CLN w/25bbls 10# brine, 12/18/2015: Continue DO CMT & CIBP good returns pumped 20bbls 10# Brine
 12/21/2015: MIRU Apollo WL, RIH w/4.5 Gauge Ring w/gamma & CCL Log, added perfs in the TUBB, ABO, Drinkard reservoirs. 7 Runs: #1 ABO interval 6658-6676, #2 ABO interval 6638-6658, #3 Drinkard interval 6509-6522, #4 Tubb interval 6242-6256, #5 6127-6142, #6 6213-6223 & #7 6184-6194 RDMO Apollo WL
 12/22/2015: RU Petroplex PT lines pump 5bbls FW to establish pump rate, pump 46bbls X25, set PKR, pump 20bbls X25 flush w/ 38.3bbls FW
 01/05/2016: MIRU Petroplex acidize picked formations Tubb/Drinkard/ABO w/15% HCL PTL 6150 good, total acid 562bbls/23604gals, total fluid 712bbls/29904gals, total med GRS 7100#, monitored Casing PSI beginning @ 305 ending @ 212 AVE PSI 172, RDMO Petroplex.
 01/06-01/10/2016: Check well PSI 1300 PSI tubing/ 100 PSI casing open well to slowly flowback, checking samples hrly total recoverd 360 BBL
 01/10/2016: PBTD @ 6690 PKR set @ 6165'
 01/13/2016: Perform MIT PSI 580 held and charted for 32 mins. Good Test w/NMOCD Rep - George Bower, Finish R/D, clean up location.
 Obtained Passing MIT
 Return well to injection
 Remedial daily work attached.

BS 3/2/16 MAR 03 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

Dorian K. Fuentes

TITLE: REGULATORY SPECIALIST

DATE: 02/08/2016

Type or print name: DORIAN K. FUENTES

E-mail address: DJVO@CHEVRON.COM

PHONE: 432-687-7631

For State Use Only

APPROVED BY:

Bill Semanish

TITLE

Staff Manager

DATE

3/2/16

Conditions of Approval (if any):