

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

DEPT. 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. 300253598500	✓
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>	✓
6. State Oil & Gas Lease No. 310866	
7. Lease Name or Unit Agreement Name TRINITY BURRUS ABO UNIT	✓
8. Well Number 26	✓
9. OGRID Number 4323	✓
10. Pool name or Wildcat TRINITY; WOLFCEMP	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3797' GR	

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 (mi)

2. Name of Operator
CHEVRON U.S.A. ✓ **HOBBS OCD**

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

MAR 17 2016

4. Well Location
 Unit Letter_B_: 330 Feet from the N_line and 2000 Feet from the E_line
 Section 27- Township 12S Range 38E NMPM County LEA ✓

RECEIVED

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

NOTICE OF INTENTION TO:

- PERFORM REMEDIAL WORK PLUG AND ABANDON
 TEMPORARILY ABANDON CHANGE PLANS
 PULL OR ALTER CASING MULTIPLE COMPL
 DOWNHOLE COMMINGLE
 CLOSED-LOOP SYSTEM
 OTHER:

SUBSEQUENT REPORT OF:

- REMEDIAL WORK ALTERING CASING
 COMMENCE DRILLING OPNS. P AND A
 CASING/CEMENT JOB
 OTHER: ANNUAL MIT TEST

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 HAS CONDUCTED THE ANNUAL MIT TEST ON THE ABOVE WELL.
 CHART ATTACHED.
 PLEASE NOTE THIS TEST IS FOR UIC ANNUAL TESTING

Spud Date: Rig Release Date:

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

GB

SIGNATURE: _____ TITLE: REGULATORY ASSISTANT DATE: 3/14/2016

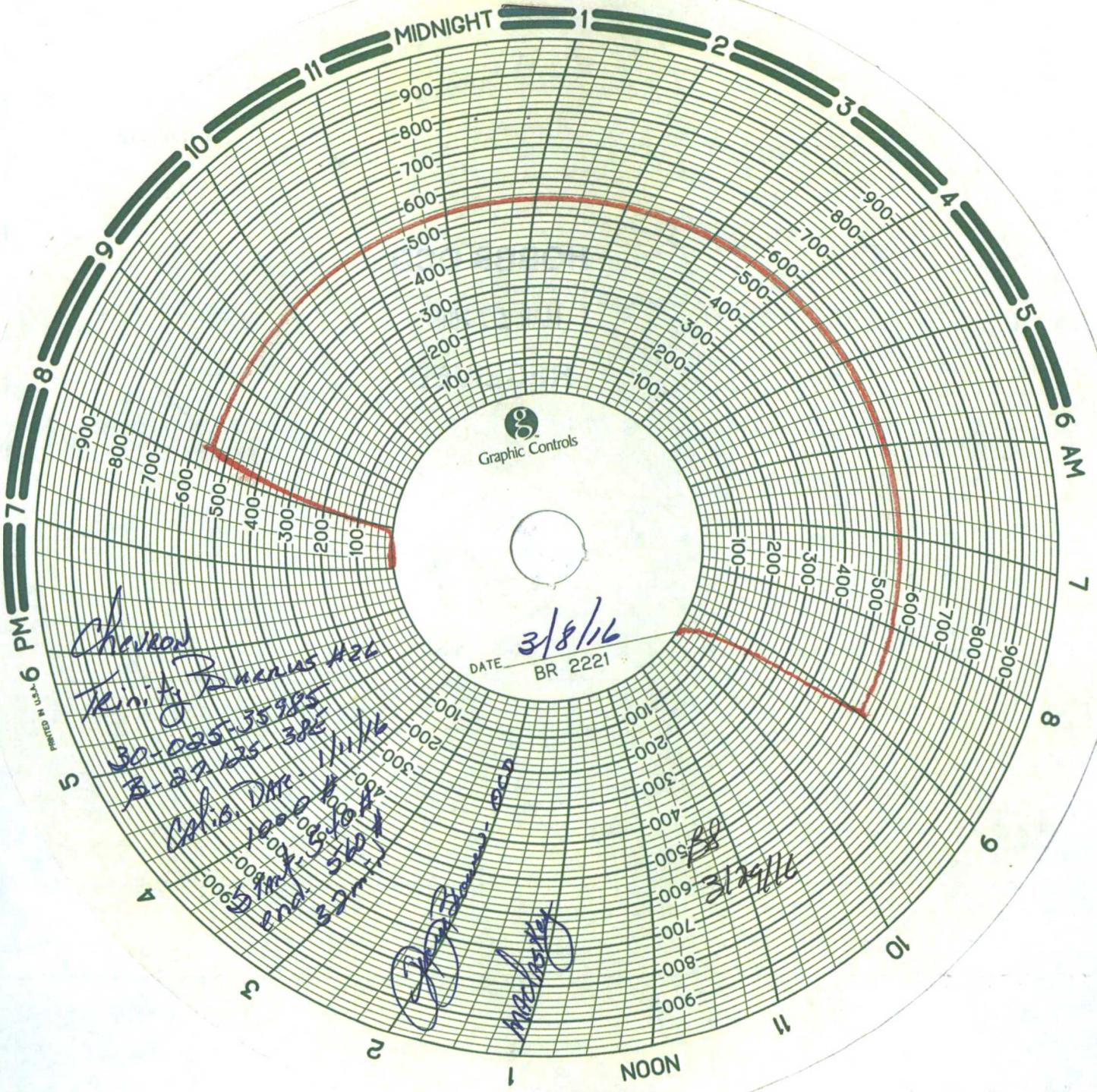
Type or print name: Adriann Garcia E-mail address: Adriann.Garcia@chevron.com PHONE: 432-687-7617

For State Use Only

APPROVED BY: Bill Samanera TITLE: Staff Manager DATE: 3/29/16
 Conditions of Approval (if any):

MAR 30 2016

h



Graphic Controls

DATE 3/8/16
BR 2221

Chevron
Trinity Bureau #22
30-025-35985
B-27-125-385
Calis DMV
1000-005404
900-005404
500-005404
300-005404
100-005404

Trinity Bureau - 2000
Mechanix

BR
3/29/16

MADE IN U.S.A.