

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
HOBBS OCD

JUL 25 2016

RECEIVED

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.)		WELL API NO. 3002529972
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator CHEVRON U.S.A.		6. State Oil & Gas Lease No.
3. Address of Operator 15 SMITH ROAD MIDLAND, TX 79705		7. Lease Name or Unit Agreement Name WEST TEAS YATES SEVEN RIVERS U
4. Well Location Unit Letter L : 1980 feet from the S line and 660 feet from the W line Section 9 - Township 20S Range 33 E NMPM County LEA		8. Well Number 913
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. OGRID Number 147179
		10. Pool name or Wildcat TEAS (YATES SEVEN RIVERS)

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

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

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.**

Spud Date:

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

SIGNATURE: Adriann Garcia TITLE: REGULATORY ASSISTANT DATE: 7-20-16

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

For State Use Only
 APPROVED BY: [Signature] TITLE: Compliance Officer DATE: 7/28/16
 Conditions of Approval (if any):

State of New Mexico
 Energy, Minerals and Natural Resources Department
 Oil Conservation Division Hobbs District Office

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BRADENHEAD TEST REPORT

Operator Name Chevron U.S.A, INC	³ API Number 3002529972
Property Name WEST TEAS YATES SEVEN RIVERS UNIT	Well No. 913

⁷ Surface Location

UL - Lot	Section	Township	Range	Feet from	N/S Line	Feet From	E/W Line	County
L	09	20S	33E	1980	S	660	W	LEA

Well Status

Well Status <i>Active</i>	SHUT-IN <i>NO</i>	PRODUCING <i>YES</i>	DATE <i>7/11/16</i>
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OPEN BRADENHEAD AND INTERMEDIATE TO ATMOSPHERE INDIVIDUALLY FOR 15 MINUTES EACH

OBSERVED DATA

If bradenhead flowed water, check all of the descriptions that apply:

	(A) Surf-Prod	(B) Interm(1)-Interm(2)	(C) Interm-Prod	(D) Prod Csmg	(E) Tubing
Pressure	<input checked="" type="checkbox"/>	NA	NA	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Flow Characteristics					
Puff	Y / N	Y / N	Y / N	<input type="checkbox"/> Y / <input type="checkbox"/> N	
Steady Flow	Y / N	Y / N	Y / N	<input type="checkbox"/> Y / <input type="checkbox"/> N	
Surges	Y / N	Y / N	Y / N	<input type="checkbox"/> Y / <input type="checkbox"/> N	
Down to nothing	Y / N	Y / N	Y / N	<input type="checkbox"/> Y / <input type="checkbox"/> N	
Gas or Oil	Y / N	Y / N	Y / N	<input type="checkbox"/> Y / <input type="checkbox"/> N	
Water	Y / N	Y / N	Y / N	<input type="checkbox"/> Y / <input type="checkbox"/> N	

If bradenhead flowed water, check all of the descriptions that apply:

CLEAR	FRESH	SALTY	SULFUR	BLACK
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Remarks: INJECTING AT THIS TIME ___ WTR, ___ GAS, ___ CO2

Signature: <i>Chris Phillips</i>	OIL CONSERVATION DIVISION
Printed name: CHRIS PHILLIPS	Entered into RBDMS
Title: PRODUCTION SPECIALIST SUB SURFACE	Re-test <i>mp</i>
E-mail Address: CPIV@CHEVRON.COM	
Date: <i>7/11/16</i>	Phone: 307-705-6406
Witness: <i>[Signature]</i>	