

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

HOBBS OCD
JUL 25 2016
RECEIVED

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

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.)		7. Lease Name or Unit Agreement Name WEST TEAS YATES SEVEN RIVERS U
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		8. Well Number 443
2. Name of Operator CHEVRON U.S.A.		9. OGRID Number 147179 / 4323
3. Address of Operator 15 SMITH ROAD MIDLAND, TX 79705		10. Pool name or Wildcat
4. Well Location Unit Letter 1 : 1855 feet from the S line and 660 feet from the E line Section 4 - Township 20S Range 33 E NMPM County LEA		
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3557 GR'		

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: <input checked="" type="checkbox"/> Intent to Repair	SUBSEQUENT REPORT OF: PLUG AND ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: ALTERING CASING <input type="checkbox"/> P AND A <input type="checkbox"/>

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.

****PLEASE NOTE THIS TEST IS FOR UIC ANNUAL TESTING****

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):

JUL 25 2016

RECEIVED

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

BRADENHEAD TEST REPORT

Operator Name Chevron U.S.A, INC	³ API Number 3002535976
Property Name WEST TEAS YATES SEVEN RIVERS UNIT	Well No. 443

⁷ Surface Location

UL - Lot	Section	Township	Range	Feet from	N/S Line	Feet From	E/W Line	County
I	04	20S	33E	1855	S	660	E	LEA

Well Status

Well Status <i>Active</i>	SHUT-IN <i>no</i>	PRODUCING <i>INT</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 Cnsg	(E)Tubing
Pressure	<i>∅</i>	<i>NA</i>	<i>NA</i>	<i>∅</i>	<i>30</i>
<u>Flow Characteristics</u>					<i>WTR</i>
Puff	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	
Down to nothing	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	
Gas or Oil	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	
Water	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	

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
E-mail Address: CPIV@CHEVRON.COM	<i>INT</i>
Date: <i>7/11/16</i>	
Phone: 307-705-6406	
Witness: <i>[Signature]</i>	