

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**  
**RECEIVED**  
**SEP 26 2016**

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

WELL API NO. 30-025-32159
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 B F HARRISON B
8. Well Number #18
9. OGRID Number 4323
10. Pool name or Wildcat TEAGUE;GLORIETA;PADDOCK
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3319' GL

**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 USA INC

3. Address of Operator  
1616 W. BENDER BLVD HOBBS, NM 88240

4. Well Location  
 Unit Letter D : 990 feet from the NORTH line and 660 feet from the WEST line  
 Section 09 Township 23S Range 37E NMPM County LEA

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

PE TE PL DC CI OTHER:	<b>E-PERMITTING &lt;SWD _____ INJECTION&gt;</b> <b>CONVERSION _____ RBDMS <u>MB</u></b> <b>RETURN TO _____ TA <u>pm.</u></b> <b>CSNG _____ ENVIRO _____ CHG LOC _____</b> <b>INT TO PA _____ P&amp;A NR _____ P&amp;A R _____</b>	<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: _____	OTHER: TA STATUS W/CHART <input checked="" 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.

09/21/2016 TEST CASING TO 540 PSI HELD GOOD. ORIGINAL CHART AND COPY IS ATTACHED. WELL IS TEMPORARILY ABANDONED.

NOTIFIED MARK WHITAKER WITH NMOCD AND HE COULD NOT COME OUT TO WITNESS. OK TO RUN CHART AND SEND TO HIM.

**This Approval of Temporary Abandonment Expires 9/21/2020**

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 Cindy Herrera-Murillo TITLE PERMITTING SPECIALIST DATE 09/22/2016

Type or print name CINDY HERRERA-MURILLO E-mail address: Cherreramurillo@chevron.com PHONE: 575-263-0431

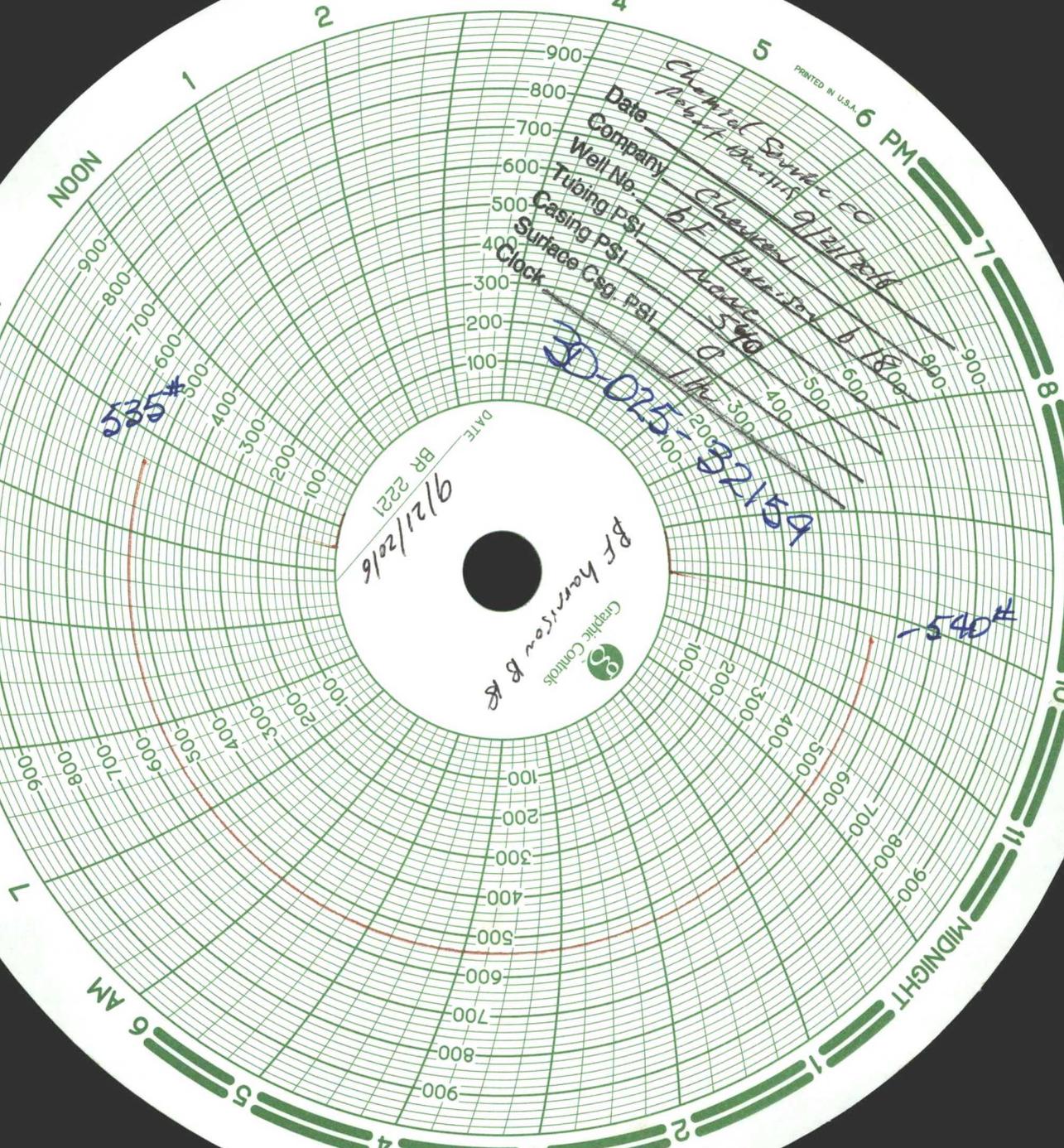
**For State Use Only**

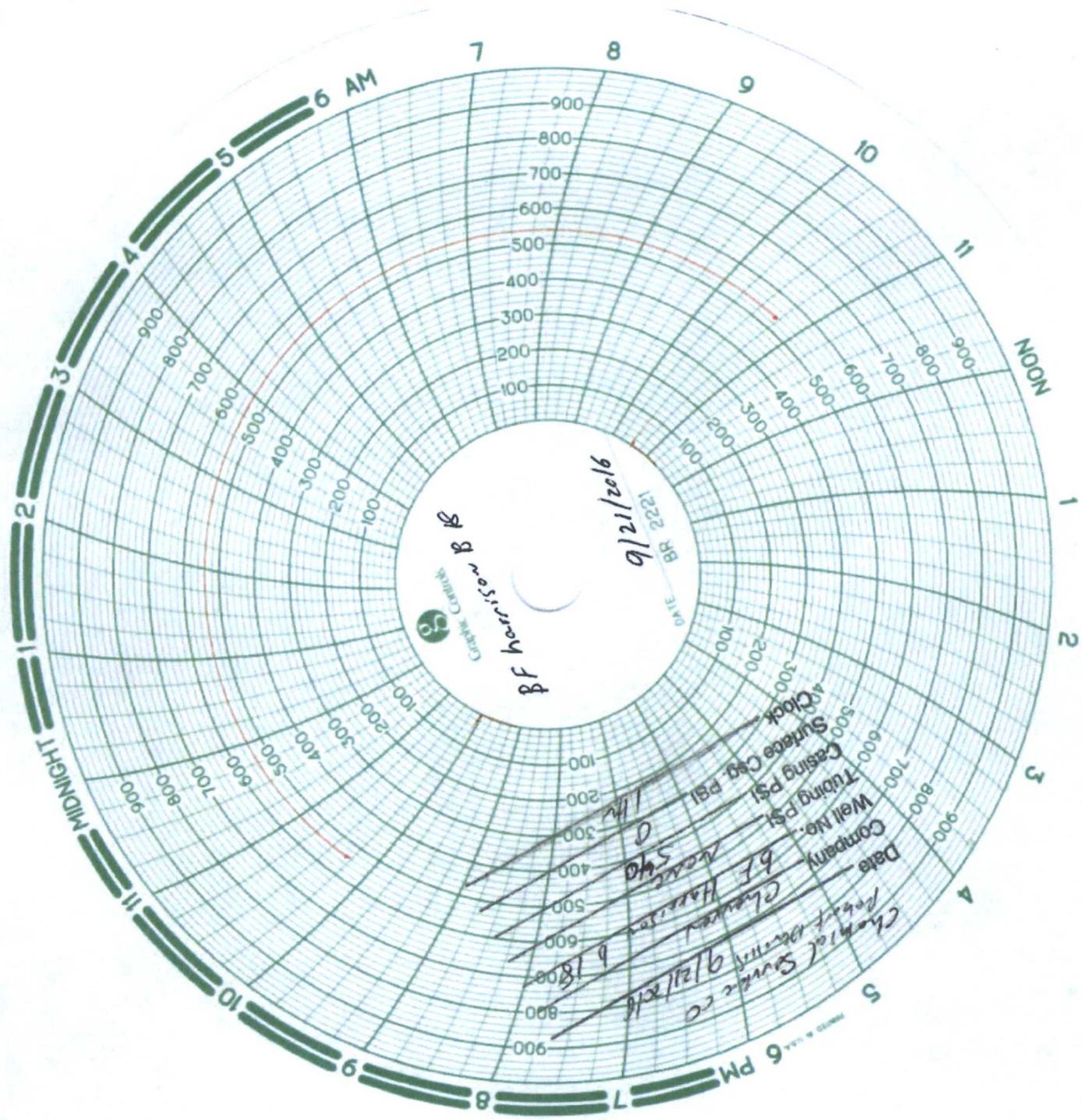
APPROVED BY: Mary Brown TITLE Dist Supervisor DATE 9/27/2016  
 Conditions of Approval (if any):

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Date *9/21/2016*  
 Company *Chemical Service Co*  
 Well No. *126121216*  
 Tubing P.S.I. *1800*  
 Casing P.S.I. *540*  
 Surface Csg. P.S.I. *0*  
 Clock *11:30*

DATE *9/21/2016*  
 BR *2221*  
 B.F. Harrison B.R.  
 Graphic Controls





B F Harrison  
 9/21/2016  
 BR 2221  
 DATE

Champion Source Co  
 Robert Beaman 9/21/2016  
 B F Harrison  
 540  
 0

MADE IN U.S.A. COMPANY