

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

**SUNDRY NOTICES AND REPORTS ON WELLS**  
*Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.*

**HOBBS OCD**  
**RECEIVED**  
DEC 19 2016

**OCD-HOBBS**

FORM APPROVED  
OMB NO. 1004-0137  
Expires: January 31, 2018

5. Lease Serial No.  
NMLC057509

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

8. Well Name and No.  
G L ERWIN BB NCT 2 10

9. API Well No.  
30-025-33803

10. Field and Pool or Exploratory Area  
JUSTIS

11. County or Parish, State  
LEA COUNTY, NM

**SUBMIT IN TRIPLICATE - Other instructions on page 2**

1. Type of Well  
 Oil Well  Gas Well  Other

2. Name of Operator  
CHEVRON USA INC  
Contact: CINDY H MURILLO  
E-Mail: CHERRERAMURILLO@CHEVRON.COM

3a. Address  
1616 W. BENDER BLVD  
HOBBS, NM 88240  
3b. Phone No. (include area code)  
Ph: 575-263-0431  
Fx: 575-263-0445

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
Sec 35 T24S R37E Mer NMP NESE 2450FSL 1225FEL

**12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Hydraulic Fracturing	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input checked="" type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 must be filed if testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator determined that the site is ready for final inspection.

CHEVRON USA INC HAS PERFORMED THE FOLLOWING ON THE ABOVE SUBJECT WELL:  
10/11/2016 MIRU APOLLO WIRELINE, PU 5.5" CIBP, TIH TO 4980'. SET CIBP. PU AND SET BACK DOWN TO VERIFY CIBP SET (GOOD), TOH, MIRU PUMP TRUCK, PRESSURE TEST CIBP TO 500#S (GOOD). PU DUMP BAILER AND TIH, SPIT 35' OF CEMENT ON TOP OF CIBP. RDMO APPOLO WIRELINE.  
10/13/2016 TEST CASING TO 540 PSI HELD GOOD FOR 30 MINUTES. A COPY OF MIT CHART IS ATTACHED. PERFORMED MIT WITH BLM REPRESENTATIVE PAUL FLOWERS PRESENT, CHARTED GOOD. WELL IT TEMPORARILY ABANDONED.

\*\*\*THIS SUNDRY REPLACES EC# 355528 SUBMITTED ELECTRONICALLY ON 10/21/2016.\*\*\*

*Notice of intent to recomplete or P&A due 04/07/2017.*

INJECTION  
 RBDMS MB  
 TA  
 CHG LOC  
 ENVIRO  
 P&A NR  
 P&A  
 CSNG  
 INT TO PA  
 E-PERMITTING <SWD  
 CONVERSION  
 RETURN TO

14. I hereby certify that the foregoing is true and correct.  
**Electronic Submission #359566 verified by the BLM Well Information System For CHEVRON USA INC, sent to the Hobbs**

Name (Printed/Typed) CINDY H MURILLO	Title PERMITTING SPECIALIST
Signature (Electronic Submission)	Date 12/01/2016

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved By _____	Title _____	Date _____
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.		
Office _____		

**APPROVED**  
DEC 13 2016  
BUREAU OF LAND MANAGEMENT  
CARLSBAD FIELD OFFICE

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2) \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED  
 YMB/OCD 12/21/2016 T/A EXPIRES 3/31/2017

