

District I
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720

District II
811 S. First St., Artesia, NM 88210
Phone: (575) 748-1283 Fax: (575) 748-9720

District III
1000 Rio Brazos Road, Aztec, NM 87410
Phone: (505) 334-6178 Fax: (505) 334-6170

District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505
Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico
Energy Minerals and Natural Resources
Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-101
Revised July 18, 2013

HOBBS OGD
MAY 08 2018
RECEIVED

AMENDED REPORT

APPLICATION FOR PERMIT TO DRILL, RE-ENTER, DEEPEN, PLUGBACK, OR ADD A ZONE

¹ Operator Name and Address CHEVRON USA INC 1616 W. BENDER BLVD HOBBS, NM 88240		² OGRID Number 4323
		³ API Number 30-025-32496
⁴ Property Code 29908	⁵ Property Name B F HARRISON B	⁶ Well No. 15

7. Surface Location

UL - Lot	Section	Township	Range	Lot Idn	Feet from	N/S Line	Feet From	E/W Line	County
P	05	23S	37E		500	S	500	E	LEA

8. Proposed Bottom Hole Location

UL - Lot	Section	Township	Range	Lot Idn	Feet from	N/S Line	Feet From	E/W Line	County
P	05	23S	37E		500	S	500	E	LEA

9. Pool Information

Pool Name <i>LANGLIE MATTIX; TR-Q-GB</i>	Pool Code <i>37240</i>
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Additional Well Information

¹¹ Work Type PLUGBACK	¹² Well Type OIL	¹³ Cable/Rotary R	¹⁴ Lease Type PRIVATE	¹⁵ Ground Level Elevation 3326'
¹⁶ Multiple NO	¹⁷ Proposed Depth 3876	¹⁸ Formation GRAYBURG	¹⁹ Contractor	²⁰ Spud Date 05/08/2018
Depth to Ground water		Distance from nearest fresh water well		Distance to nearest surface water

We will be using a closed-loop system in lieu of lined pits

21. Proposed Casing and Cement Program

Type	Hole Size	Casing Size	Casing Weight/ft	Setting Depth	Sacks of Cement	Estimated TOC
	12 1/4"	9 5/8"	36#	3876		SURFACE
						SURFACE

Casing/Cement Program: Additional Comments

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22. Proposed Blowout Prevention Program

Type	Working Pressure	Test Pressure	Manufacturer

²³ I hereby certify that the information given above is true and complete to the best of my knowledge and belief. I further certify that I have complied with 19.15.14.9 (A) NMAC <input type="checkbox"/> and/or 19.15.14.9 (B) NMAC <input type="checkbox"/>, if applicable. Signature: <i>Cindy Herrera-Murillo</i> Printed name: CINDY HERRERA-MURILLO Title: PERMITTING SPECIALIST E-mail Address: CHERRERAMURILLO@CHEVRON.COM Date: 05/07/2018 Phone: 575-263-0431	OIL CONSERVATION DIVISION	
	Approved By: <i>[Signature]</i>	
	Title: <i>[Signature]</i>	
	Approved Date: <i>05/10/18</i>	Expiration Date: <i>05/10/20</i>
	Conditions of Approval Attached	