

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 OGD

JUN 22 2018

RECEIVED

SUNDRY NOTICES AND REPORTS ON WELL (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 <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input checked="" type="checkbox"/> INJ		WELL API NO. 3002512321
2. Name of Operator CHEVRON U.S.A.		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
3. Address of Operator 6301 DEAUVILLE BLVD MIDLAND, TX 79706		6. State Oil & Gas Lease No.
4. Well Location Unit Letter A: 660 feet from the NORTH line and 660 feet from the EAST line Section 32 Township 24 S Range 38E NMPM County LEA		7. Lease Name or Unit Agreement Name WEST DOLLARHIDE DRINKARD UNIT
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		8. Well Number 42
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: <input type="checkbox"/>		SUBSEQUENT REPORT OF: 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: ANNUAL MIT TEST <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. CHEVRON U.S.A. INC HAS CONDUCTED THE ANNUAL MIT TEST ON THE ABOVE WELL. CHART ATTACHED. **PLEASE NOTE THIS TEST IS FOR UIC ANNUAL TESTING**		9. OGRID Number 4323
Spud Date: <input type="text"/> Rig Release Date: <input type="text"/>		10. Pool name or Wildcat DOLLARHIDE TUBB DRINKARD

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: Jessica Jones TITLE: REGULATORY ASSISTANT DATE: 6/19/2018

Type or print name: Jessica Jones E-mail address: jjzi@chevron.com PHONE: 432-687-7575

For State Use Only

APPROVED BY: [Signature] TITLE: Compliance Officer Supervisor DATE: 6/22/18
 Conditions of Approval (if any):

