

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  
 MAY 16 2019  
 RECEIVED

WELL API NO. 3002503811
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name LOVINGTON SAN ANDRES UNIT
8. Well Number 41
9. OGRID Number 4323
10. Pool name or Wildcat LOVINGTON FRAYBURG SAN ANDRES
11. Elevation (Show whether DR, RKB, RT, GR, etc.)

**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 <input type="checkbox"/> Gas Well <input type="checkbox"/> Other Injector <input checked="" type="checkbox"/>
2. Name of Operator CHEVRON MIDCONTINENT, L.P.
3. Address of Operator 6301 DEAUVILLE BLVD MIDLAND, TEXAS 79706
4. Well Location Unit Letter G: 1980 FNL & 1980 FEL Section 1 Township 17 S Range 36E NMPM County LEA

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 type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: ANNUAL MIT TEST	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.

**CHEVRON HAS CONDUCTED THE REQUIRED MIT TEST ON THE ABOVE WELL. CHART ATTACHED.**  
**\*\*PLEASE NOTE THIS TEST IS FOR UIC ANNUAL TESTING\*\***

Spud Date:  Rig Release Date:

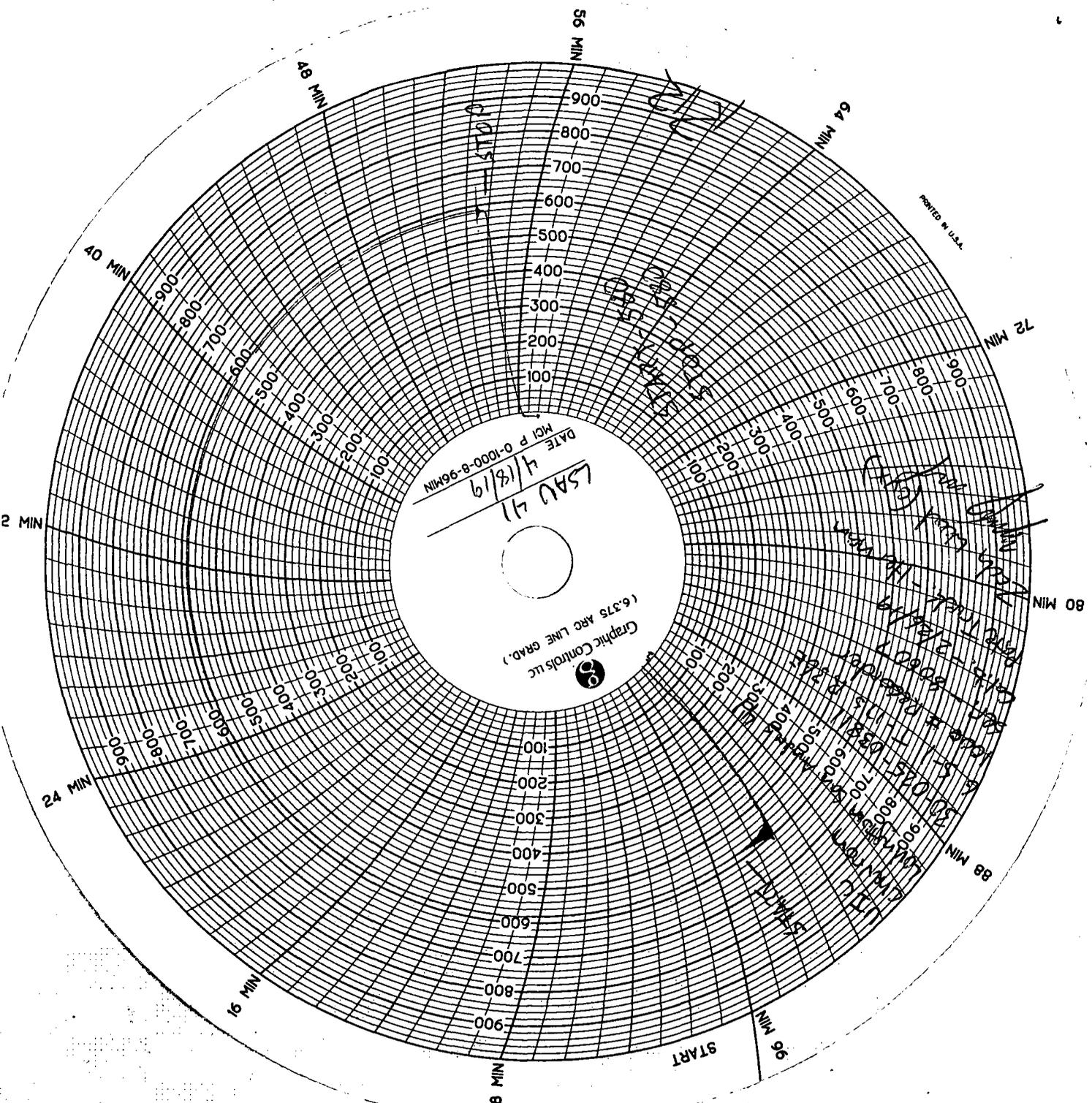
I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE: J Jones TITLE: REGULATORY ASSISTANT DATE: 5/14/19

Type or print name: JESSICA JONES E-mail address: JJZI@CHEVRON.COM PHONE: 432-687-7575

For State Use Only

APPROVED BY: Rick Rickman TITLE: Dist 1 Supv DATE: 5-16-19  
 Conditions of Approval (if any):



LSAV 41  
 DATE 4/18/19  
 MCI P 0-1000-8-96MIN

Graphic Controls Inc  
 (6.375 Arc Line Grad.)

PRINTED IN U.S.A.

Handwritten notes and signature on the right side of the chart, including a signature and various illegible scribbles.