

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

WELL API NO. 3002503835
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 42
9. OGRID Number 4323
10. Pool name or Wildcat LOVINGTON GRAYBURG SAN ANDRES

SUNDRY NOTICES AND REPORTS ON WELLS
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO OPEN 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 Injector

2. Name of Operator
CHEVRON MIDCONTINENT, L.P.

3. Address of Operator
6301 DEAUVILLE BLVD MIDLAND, TEXAS 79706

4. Well Location
 Unit Letter F: 1980 FNL & 1980 FWL
 Section 1 Township 17 S Range 36E NMPM County LEA

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

HOBBS OCD
 MAY 14 2019
 RECEIVED

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"/>
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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:

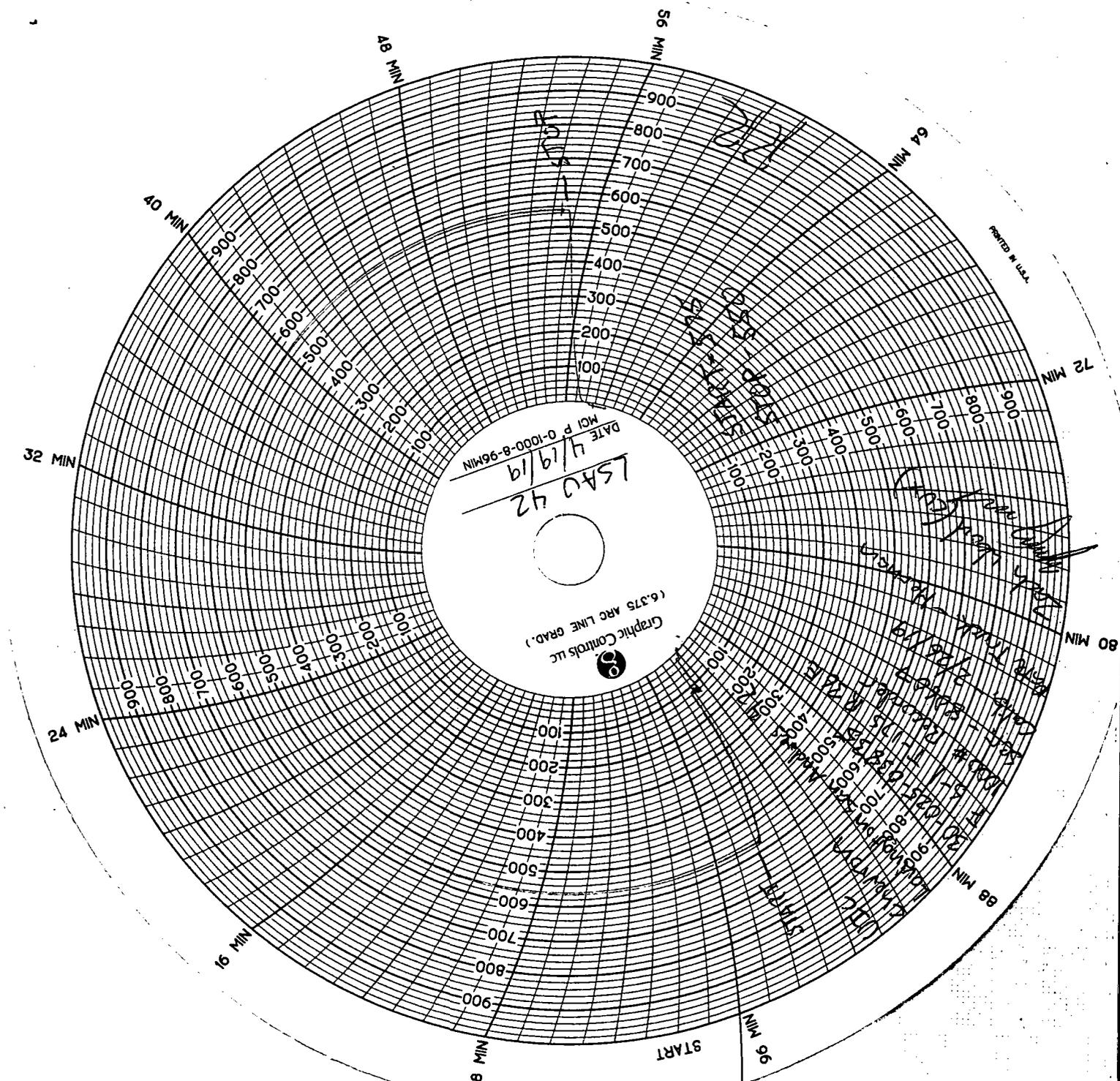
I hereby certify that the information above is true and complete to the best of my knowledge and belief.

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: Reck Ruckman TITLE: D.S.T. / S.D.V. DATE: 5-16-19
 Conditions of Approval (if any):



DATE 4/19/19
 LS40 42
 MCI P 0-1000-8-96MIN

Graphic Controls LLC
 (6.375 ARC LINE GRAD.)

PRINTED IN U.S.A.

32 MIN

24 MIN

16 MIN

8 MIN

START

96 MIN

88 MIN

80 MIN

72 MIN

64 MIN

56 MIN

48 MIN

40 MIN

900
800
700
600
500
400
300
200
100

900
800
700
600
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400
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