

District I - (575) 393-6161
1625 N. French Dr., Hobbs, NM 88240
District II - (575) 748-1283
811 S. First St., Artesia, NM 88201
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

HOBBS OCD
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

JAN 13 2020

RECEIVED

WELL API NO. 30-025-37638
5. Indicate Type of Lease STATE ☐ FEE ☒
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name AM YORK
8. Well Number 4
9. OGRID Number 4323
10. Pool name or Wildcat PENROSE SKELLY; GRAYBURG

SUBMITTING OFFICES 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 ☒ Gas Well ☐ Other ☐ 2. Name of Operator Chevron U.S.A. INC. 3. Address of Operator 6301 DEAUVILLE BLVD, MIDLAND, TX 79706 4. Well Location Unit Letter <u>H</u> : <u>2310</u> feet from the <u>North</u> line and <u>990</u> feet from the <u>EAST</u> line Section <u>20</u> Township <u>21S</u> Range <u>37E</u> NMPM County <u>Lea</u> 11. Elevation (Show whether DR, RKB, RT, GR, etc.) KB 3989'	
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12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data */rm*

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ TEMPORARILY ABANDON ☐ CHANGE PLANS ☐ PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐ DOWNHOLE COMMINGLE ☐ CLOSED-LOOP SYSTEM ☐ OTHER: ☐	SUBSEQUENT REPORT OF: REMEDIAL WORK ☐ ALTERING CASING ☐ COMMENCE DRILLING OPNS. ☐ P AND A ☐ CASING/CEMENT JOB ☐ OTHER: TA Status w/ MIT Chart and Bradenhead test ☒
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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 is requesting a two-year TA extension for the above subject.

01/08/2020 Test casing to 600 PSI for 30 minutes. Test Successful. Please see attached Original MIT Test and Bradenhead test a copy of both attached.

Current TA Expires on 2/3/2020

FINAL TA STATUS- EXTENSION

Approval of TA EXPIRES: 2/3/22
Well needs to be PLUGGED OR RETURNED
to PRODUCTION
BY THE DATE STATED ABOVE: 27

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 Cindy Herrera-Murillo TITLE Permitting Specialist DATE 01/10/2020

Type or print name Cindy Herrera-Murillo E-mail address: Cherreramurillo@chevron.com PHONE: 575-263-0431
For State Use Only

APPROVED BY: Kerry Jantz TITLE CO A DATE 1-23-20
Conditions of Approval (if any)

State of New Mexico
Energy, Minerals and Natural Resources Department
Oil Conservation Division Hobbs District Office

BRADENHEAD TEST REPORT

Operator Name Chevron		API Number 30-025-37638
Property Name A. M. York		Well No. 4

1. Surface Location

UL - Lot H	Section 20	Township 21S	Range 37E	Feet from 2310	NS Line North	Feet From 990	E/W Line East	County LEA
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Well Status

☒ YES	TA'D WELL	NO	YES	SHUT-IN	☒ NO	INJ	INJECTOR	SWD	OIL	PRODUCER	GAS	DATE 1-08-2020
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OBSERVED DATA

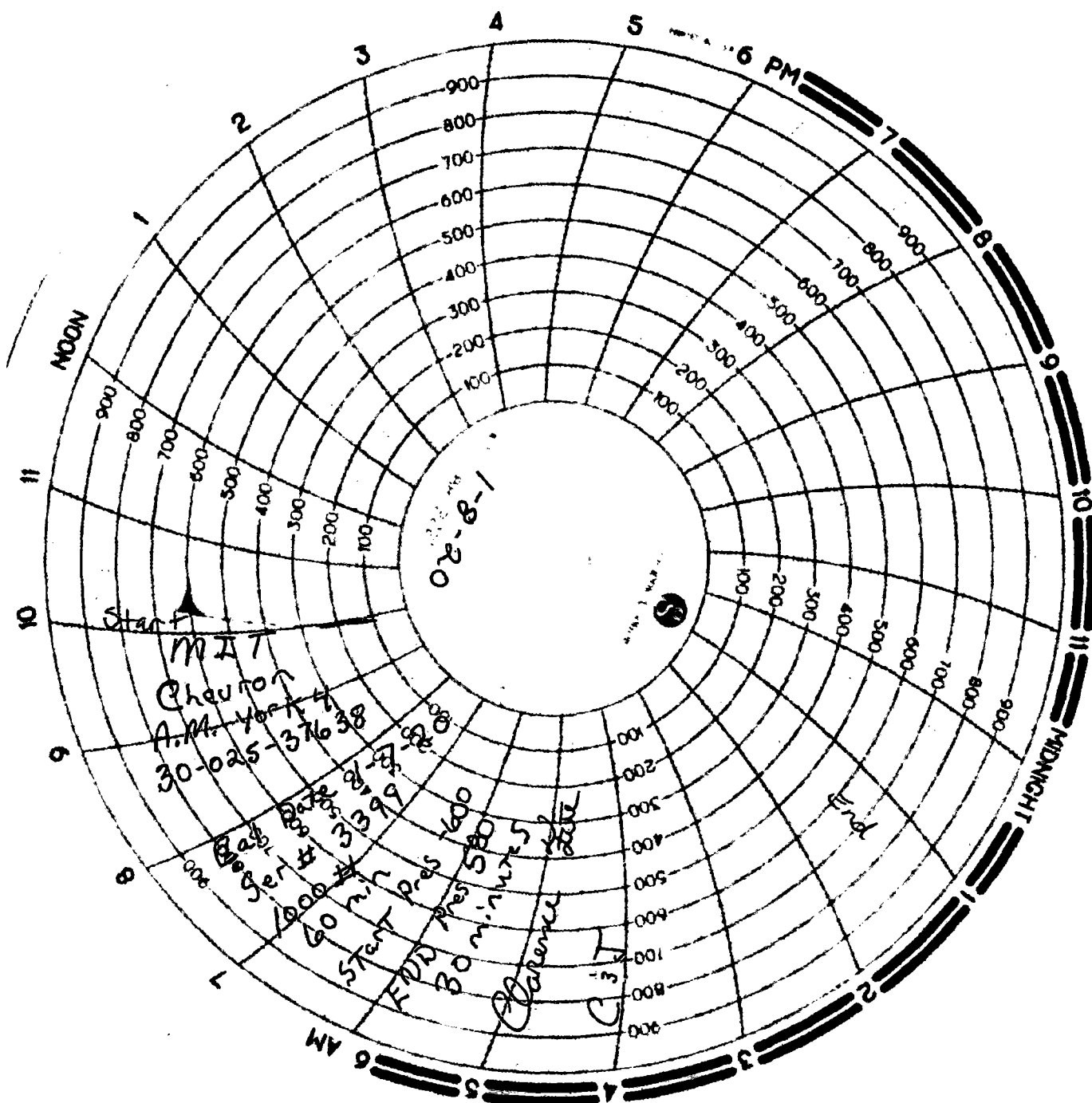
	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Cmg	(E)Tubing
Pressure	10	0		0	
Flow Characteristics					
Puff	(Y) / N	Y / (N)	Y / N	Y / (N)	CO2 WTR ____ GAS ____ Type of fluid injected for waterflood if applies
Steady Flow	Y / (N)	Y / (N)	Y / N	Y / (N)	
Surges	Y / (N)	Y / (N)	Y / N	Y / (N)	
Down to nothing	(Y) / N	(Y) / N	Y / N	(Y) / N	
Gas or Oil	Y / (N)	Y / (N)	Y / N	Y / (N)	
Water	Y / (N)	Y / (N)	Y / N	Y / (N)	

Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

Signature Clarence Fite	OIL CONSERVATION DIVISION
Printed name Clarence Fite	Entered into RBDMS
Title ALCR	Re-test
E-mail Address FITE@Chevron.Com	
Date 1-8-2020	Phone 575-631-9139
Witness	

INSTRUCTIONS ON BACK OF THIS FORM

2K



Dissect
1633 W French Dr., Hobbs, NM 88240
Phone: (575) 291-6161 Fax: (575) 291-6770

State of New Mexico
Energy, Minerals and Natural Resources Department
Oil Conservation Division Hobbs District Office

BRADENHEAD TEST REPORT

Operator Name Chvron	API Number 30-025-37638
Property Name A. M. York	Well No 4

1. Surface Location

UL - 1, 2	Section	Township	Range	Feet from	N/S Line	Feet From	EW Line	County
H	20	21S	37E	2310	North	990	East	LEA

Well Status

☒ YES TA'D WELL	☐ NO	☒ YES SHUT-IN	☐ NO	INJ	INJECTOR	SWD	☒ OIL PRODUCER	GAS	DATE 1-09-2020
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OBSERVED DATA

	(A)Surface	(B)Interm(A)	(C)Interm(B)	(D)Prod Cmg	(E)Tubing
Pressure	10	0		0	0
Flow Characteristics					TA
Puff	☒ Y / ☐ N	☐ Y / ☒ N	☐ Y / ☐ N	☐ Y / ☒ N	CO2
Steady Flow	☐ Y / ☒ N	☐ Y / ☒ N	☐ Y / ☐ N	☐ Y / ☒ N	WTR
Surges	☐ Y / ☒ N	☐ Y / ☒ N	☐ Y / ☐ N	☐ Y / ☒ N	GAS
Down to nothing	☒ Y / ☐ N	☒ Y / ☐ N	☐ Y / ☐ N	☒ Y / ☐ N	Type of fluid Inferred for Watershed if applicable
Gas or Oil	☐ Y / ☒ N	☐ Y / ☒ N	☐ Y / ☐ N	☐ Y / ☒ N	
Water	☐ Y / ☒ N	☐ Y / ☒ N	☐ Y / ☐ N	☐ Y / ☒ N	

Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

Signature Clarence Fite	OIL CONSERVATION DIVISION
Printed name Clarence Fite	Entered into RBDMS
Title ALCR	Re-test
E-mail Address FITE@Chevron.com	267
Date 1-9-2020	Witness
Phone 575-631-9139	

INSTRUCTIONS ON BACK OF THIS FORM