Submit 3 copies to Appropriate

State of New Mexico

Energy, Minerals and Natural Resources Department

Form C-103

District Office			Revis	ed 1-1-89
<u>DISTRICT I</u>	OIL CONSERVATION	ON DIVISION		
P.O. Box 1980, Hobbs, NM 88240			WELL API NO.	
DISTRICT II	P.O. Box 208		30-025-25672	
P.O. Box Drawer DD, Artesia, NM 882 DISTRICT III	Santa Fe, New Mexico	5 87504-2088	5. Indicate Type of Lease STATE	FEE
1000 Rio Brazos Rd., Aztec, NM 874	10		6. State Oil / Gas Lease No. B-9312	
SUNDRY N	OTICES AND REPORTS ON WEL	LS		an sharp
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO			7. Lease Name or Unit Agreement Name	
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMI (FORM C-101) FOR SUCH PROPOSALS.			MEXICO 'L'	
1. Type of Well: OIL G	GAS VELL OTHER			
2. Name of Operator			8. Well No.	
•	N USA INC		26	
Address of Operator 15 SMITE	RD, MIDLAND, TX 79705		9. Pool Name or Wildcat DOLLARHIDE FUSSELMAN	
4. Well Location			BOLD IT INDE TOOCELINATE	
Unit Letter D:	566 Feet From The NOR	TH Line and 860	Feet From TheWESTLine	
Section 5	Township 25S	Range 38E NN	MPM <u>LEA</u> COUNTY	•
。	10. Elevation (Show whether DF, RKB	, RT,GR, etc.)		
11. Check	Appropriate Box to Indicate Na	ture of Notice, Report	, or Other Data	
NOTICE OF INTENT		SUBSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING OP		
PULL OR ALTER CASING		CASING TEST AND CEMEN		. Ц
<u></u>	A STATUS (RE-TEST)		NI JOB	
OTHER: REQUEST T	A STATUS (RE-TEST)	OTHER:		🗆
 Describe Proposed or Completed proposed work) SEE RULE 1103. 	Operations (Clearly state all pertinent d	etails, and give pertinent d	ates, including estimated date of starting	any
CHEVRON U.S.A. INC. INTENDS TO	D TEMPORARILY ABANDON THE SUE	BJECT (RE-TEST & RETU	JRN TO TA STATUS)	
1) CIBP SET @ 8124'. 2) TEST CSG TO 500 PSI FOR 30 N 3) RUN CHART FOR NMOCD. 4) RETURN WELL TO TA STATUS.				

~/ V	e and complete to the best of my knowledge and belief	i.		
SIGNATURE SIGNATURE	Sulleton TIT	LE_Regulatory Specialist	DATE 8	/10/2006
\bigcirc	1		Tolophana Na	400 007 7075
TYPE OR PRINT NAME	Denise Pinkerton		Telephone No.	432-687-7375

OC FIELD REPRESENTATIVE II/STAFF MANAGER AUG 1 5 2006