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State of New Mexico

Form C-103

Energy, Minerals and Natural Resources Department to Appropriate District Office Revised 1-1-89 DISTRICT I OIL CONSERVATION DIVISION WELL API NO. P.O. Box 1980, Hobbs, NM 88240 P.O. Box 2088 30-025-24815 DISTRICT II Santa Fe. New Mexico 87504-2088 5. Indicate Type of Lease P.O. Box Drawer DD, Artesia, NM 88210 STATE [FEE 🗸 DISTRICT III 6. State Oil / Gas Lease No. 1000 Rio Brazos Rd., Aztec, NM 87410 SUNDRY NOTICES AND REPORTS ON WELLS (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 ALICE PADDOCK (FORM C-101) FOR SUCH PROPOSALS. OIL 1. Type of Well: WELL WELL **OTHER** 8. Well No. 2. Name of Operator 6 CHEVRON USA INC 9. Pool Name or Wildcat 3. Address of Operator 15 SMITH RD, MIDLAND, TX 79705 **TUBB OIL AND GAS** 4. Well Location Feet From The SOUTH Line and 2230' Feet From The EAST Unit Letter_ Township 22-S Range 37-E NMPM . LEA COUNTY Section 1 10. Elevation (Show whether DF, RKB, RT,GR, etc.) 3351 11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PLUG AND ABANDON REMEDIAL WORK ALTERING CASING PERFORM REMEDIAL WORK **CHANGE PLANS** COMMENCE DRILLING OPERATION PLUG AND ABANDONMENT TEMPORARILY ABANDON CASING TEST AND CEMENT JOB PULL OR ALTER CASING MIT W/CHART FOR TA STATUS OTHER: OTHER: ~ 12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

3-14-07: NOTIFIED NMOCD. UNSEAT PUMP. LD RODS & PUMP. PMP 40 BBLS DN CSG. REL TAC. TIH W/BIT, & 96 STANDS TO 5950. TIH W/7" CIBP & 96 STANDS TO 5940. SET CIBP, LOADED WELL W/204 BBLS 8.6# BRINE. TEST CIBP TO 500 PSI. HELD. CIRC240 BBLS PKR FLUID. DUMP CMT ON CIBP. TEST CSG TO 500 PSI FOR 30 MINUTES. (ORIGINAL CHART & COPY OF CHART ATTACHED).

WELL IS TEMPORARILY ABANDONED.

CONDITIONS OF APPROVAL, IF ANY:

This Approval of Temporary 3/14/12 Apardonment Expires ...

TYPE OR PRINT NAME (This space for State Use)	Denise Pinkerton	SEPRESENTATIVE II/STAFF MAINAGER	APR 0 9 2007
	Donico Dinkorton		Telephone No. 432-687-7375
SIGNATURE WALSE	1 . 7 . 7 . 5	TITLE Regulatory Specialist	DATE <u>4/3/2007</u>
I hereby certify that the information above is	true and complete to the best of my knowledge and	belief	

