

OCD-HOBBS

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT -" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well ☒ OIL WELL ☐ GAS WELL ☐ OTHER

2. Name of Operator
CHEVRON USA INC

3. Address and Telephone No. 15 SMITH RD, MIDLAND, TX 79705 432-687-7375

4. Location of Well (Footage, Sec, T, R, M., or Survey Description)
Unit Letter K : 2310 Feet From The SOUTH Line and 2310 Feet From The
WEST Line Section 8 Township 22-S Range 37-E

5. Lease Designation and Serial No
LCO33706B

6. If Indian, Alottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and Number
C.P. FALBY B FEDERAL
5

9. API Well No
30-025-37938

10. Field and Pool, Exploratory Area
PENROSE SKELLY GRAYBURG

11. County or Parish, State
LEA, NM

12. Check Appropriate Box(s) To Indicate Nature of Notice, Report, or Other Data

TYPE OF SUBMISSION	TYPE OF ACTION
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> OTHER: APD EXTENSION CANCELLATION
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log Form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

CHEVRON U.S.A. INC. RESPECTFULLY ASKS FOR A CANCELLATION OF THE REQUEST FOR AN EXTENSION FOR THE DRILLING PERMIT ON THE SUBJECT WELL FILED ON 5-17-07. WE WERE ABLE TO SPUD THE WELL BEFORE THE APD EXPIRED.

THANKS FOR ALL YOUR HELP IN THIS MATTER.



14. I hereby certify that the foregoing is true and correct.

SIGNATURE Denise Pinkerton TITLE Regulatory Specialist DATE 6/19/2007

TYPE OR PRINT NAME Denise Pinkerton

(This space for Federal or State office use)

APPROVED /s/ Don Peterson
CONDITIONS OF APPROVAL, IF ANY

TITLE

ACTING

FIELD MANAGER

DATE

6/19/07

UNITED STATES
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SUBMIT IN TRIPLICATE

1. Type of Well. ☒ OIL WELL ☐ GAS WELL ☐ OTHER

2. Name of Operator
CHEVRON USA INC

3. Address and Telephone No 15 SMITH RD, MIDLAND, TX 79705 432-687-737

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Unit Letter K : 2310 Feet From The SOUTH Line and 2310 Feet From The
WEST Line Section 8 Township 22-S Range 37-E

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30-025-37938

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LEA, NM

12. Check Appropriate Box(s) To Indicate Nature of Notice, Report, or Other Data

TYPE OF SUBMISSION	TYPE OF ACTION	
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> OTHER APD EXTENSION	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log Form)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

CHEVRON U.S.A. INC. RESPECTFULLY ASKS FOR AN EXTENSION OF THE SUBJECT DRILLING PERMIT.
BECAUSE OF BLACK-OUT DATES FOR DRILLING DUE TO PRAIRIE CHICKEN STIPULATIONS, WE CANNOT DRILL THIS WELL IN A TIMELY MANNER.

THE APPROVED APD EXPIRES ON JUNE 12, 2007.

THANK YOU FOR YOUR CONSIDERATION IN THIS MATTER.

APPROVED FOR 24 MONTH PERIOD
ENDING 6-12-2009

14. I hereby certify that the foregoing is true and correct

SIGNATURE Denise Pinkerton TITLE Regulatory Specialist DATE 5/17/2007

TYPE OR PRINT NAME Denise Pinkerton

(This space for Federal or State office use)

APPROVED

CONDITIONS OF APPROVAL, IF ANY:

TITLE **FIELD MANAGER**

DATE

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

CARLSBAD FIELD OFFICE