

Submit 3 Copies To Appropriate District
Office
District I
1625 N French Dr , Hobbs, NM 88240
District II
1301 W. Grand Ave , Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S St. Francis Dr , Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
May 27, 2004

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

WELL API NO. 30-025-31265
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 WEST LOVINGTON UNIT
8. Well Number 81
9. OGRID Number 241333
10. Pool name or Wildcat LOVINGTON, UPPER S/A WEST

SUNDRY NOTICES 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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator CHEVRON MIDCONTINENT, L.P.	
3. Address of Operator 15 SMITH ROAD, MIDLAND, TEXAS 79705	
4. Well Location Unit Letter D 105 feet from the NORTH line and 1350 feet from the WEST line Section 9 Township 17S Range 36E NMPM County LEA	
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>	
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____	
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____	

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> OTHER: INTENT TO TA <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: <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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

CHEVRON MIDCONTINENT, L.P. INTENDS TO TEMPORARILY ABANDON THE SUBJECT WELL DUE TO LOW PRODUCTION AND HIGH COSTS TO RETURN TO PRODUCTION. THE INTENDED PROCEDURE IS AS FOLLOWS:

- 1) MIRU. KILL WELL.
- 2) POH W/RODS & PUMP.
- 3) NDWH. NUBOP.
- 4) POH W/TBG SCANNING OUT.
- 5) TIH W/BIT & SCRAPER TO TOP OF PERFS @ 4724.
- 6) MIRU WL.
- 7) SET PLUG @ 4650. 74' ABOVE PERFS.
- 8) TIH & TAG CIBP. VERIFY PLUG IS SET.
- 9) TIH W/TBG. CIRC & PRETEST CSG TO 500 PSI FOR 15 MINS.
- 10) TOH LD TBG.
- 11) NDBOP. NUWH W/FLANGE W/2" VALVE ON TOP W/PRESSURE GAUGE INSTALLED.
- 12) CIRC W/PKR FLUID.
- 13) PERFORM MIT FOR NMOCD TO 500 PSI FOR 15 MINUTES.
- 14) RDMO.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Denise Pinkerton TITLE REGULATORY SPECIALIST DATE 11-19-2007

Type or print name DENISE PINKERTON E-mail address: leakejd@chevron.com Telephone No. 432-687-7375

For State Use Only

APPROVED BY: Harry W. Wink OC FIELD REPRESENTATIVE W/STAFF MANAGER DEC 06 2007
TITLE _____ DATE _____

Conditions of Approval (if any)

