Submit 3 Copies To Appropriate District Office District I 1625 N. French Dr., Hobbs, NM88240		Form C-103	
		May 27, 2004	7
		WELL API NO.	
District II OIL CONSERVATION DIVISION		30-025-05364	4
District II 1301 W Grand Ave, Artesia, NM 88210 District III 1220 South St. Francis Dr.		5. Indicate Type of Lease	
1000 Rio Brazos Rd, Aztec, NM 87410 District IV 1220 S St. Francis Dr, Santal Fe, NM 87505 87505		STATE FEE	4
		6. State Oil & Gas Lease No.	
SUNDRY NOTICES AND REPORTS ON WELLS		7. Lease Name or Unit Agreement Name/	1
(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		LOVINGTON SAN ANDRES UNIT	
PROPOSALS) 1. Type of Well: Oil Well Gas Well Other INJECTION		8. Well Number 7	
2. Name of Operator CHEVRON MIDCONTINENT L. P.		9. OGRID Number 241333	
CHEVRON MIDCONTINENT, L.P. 3. Address of Operator		10. Pool name or Wildcat Graybing	┪
15 SMITH ROAD, MIDLAND, TEXAS 79705		LOVINGTON SAN ANDRES	
4. Well Location			ŀ
Unit Letter G: 1980 feet from the NORTH line and 198		4	
Section 31 Township 16-S Range 37-E	NMPM NT CD 1	County LEA	a
11. Elevation (Show whether I	OR, RKB, RI, GR, etc		
Pit or Below-grade Tank Application ☐ or Closure ☐			
		stance from nearest surface water	
Pit Liner Thickness: mil Below-Grade Tank: Volume		Construction Material	J
12. Check Appropriate Box to Indicate	Nature of Notice	, Report or Other Data	
NOTICE OF INTENTION TO: SUB		SSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐	REMEDIAL WOR	RK	
TEMPORARILY ABANDON	COMMENCE DF	COMMENCE DRILLING OPNS. ☐ P AND A ☐	
PULL OR ALTER CASING	CASING/CEMEN	NT JOB ☐	
	OTHER		
OTHER: INTENT TO TEMPORARILY ABANDON 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			n
or recompletion.			•
CHEVRON MIDCONTINENT, L.P. INTENDS TO TEMPORARILY ABANDON THE SUBJECT WELL BY DISCONNECTING			
THE INJECTION LINE, LEAVING INJECTION EQUIPMENT IN THE HOLE & RUNNING A MIT.			
I hereby certify that the information above is true and complete to the	e hest of my knowled	ge and helief. I further certify that any nit or helow-	
grade tank has been/will be constructed or closed according to NMOCD guidelin	es □, a general permit □	or an (attached) alternative OCD-approved plan .	
$\mathcal{L}(\mathcal{L})$			
SIGNATURE CONTROL TITLE	Regulatory Speciali	st DATE 09-10-2008	
Type or print name Denise Pinkerton E-mail address: leakejd@c	hevron.com Tele	phone No. 432-687-7375	
		ve il/staff raangager	
		2ED	
APPROVED BY: Carry W. TITLE		DATE EP 16 200)8
Conditions of Approval (if any)			_
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Condition of Approval Natific OCD Hobbs			
Condition of Approval Notify OCD Hobbs office 24 hours prior to running MIT Test & Chart			
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