

**RECEIVED**

FEB 11 2009

**HOBBSOCD**

## OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

WELL API NO. /  
30-025-03798

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil &amp; Gas Lease No.

7. Lease Name or Unit Agreement Name  
LOVINGTON PADDOCK UNIT

8. Well Number 16

9. OGRID Number 241333

10. Pool name or Wildcat  
LOVINGTON PADDOCK

## 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 ☐ Gas Well ☒ Other Inject2. Name of Operator  
CHEVRON MIDCONTINENT, L.P.3. Address of Operator  
15 SMITH ROAD, MIDLAND, TEXAS 79705

## 4. Well Location

Unit Letter D: 660 feet from the NORTH line and 660 feet from the WEST line

Section 36 Township 16-S Range 36-E NMPM County LEA

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

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

## NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐  
DOWNHOLE COMMINGLE ☐

## SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐

## OTHER:

OTHER: MIT TEST WITH CHART

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

10-23-08: TEST CSG TO 500 PSI FOR 30 MINUTES. (ORIGINAL CHART &amp; COPY OF CHART ATTACHED)

Spud Date:

Rig Release Date:

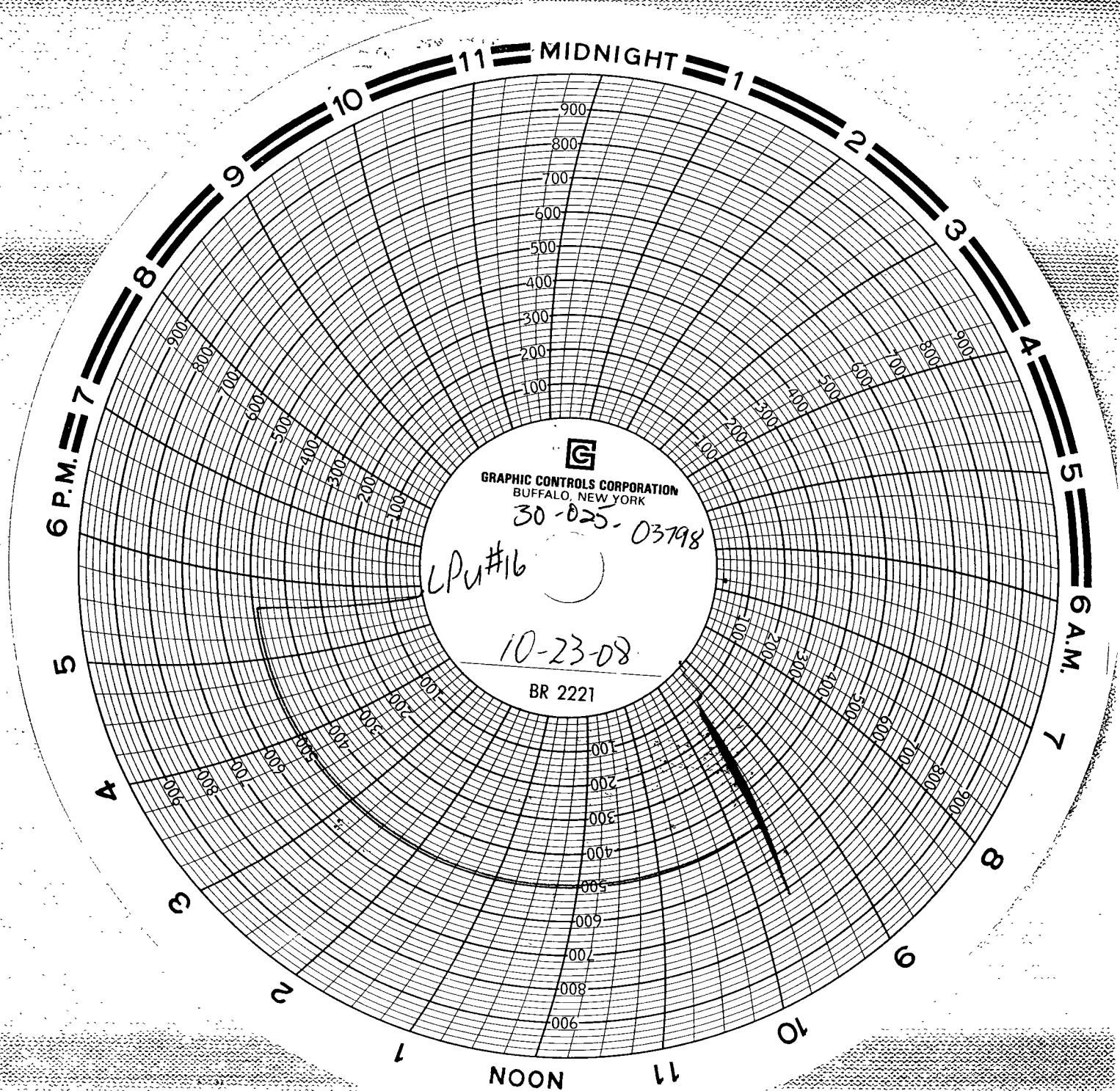
I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Denise Pinkerton TITLE REGULATORY SPECIALIST DATE 02-10-09Type or print name DENISE PINKERTON E-mail address: leakejd@chevron.com PHONE: 432-687-7375

## For State Use Only

APPROVED BY: Tammy Hill TITLE DISTRICT 1 SUPERVISOR DATE FEB 13 2009

Conditions of Approval (if any):



LPO #16  
Madaskay #13  
96 mio chart  
10-23-08  
D. E. Anon

660 N/  
660 W  
D-36 16S 36E  
Lns