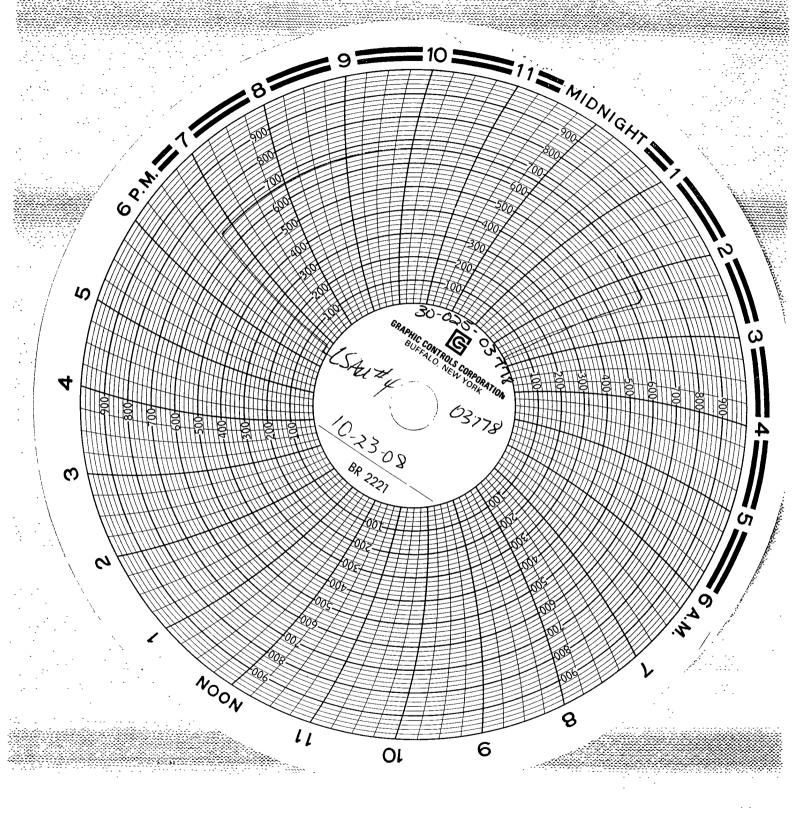
Submit 3 Copies To Appropriate District Office District I 1625 N French Dr , Hobbs, NM 88240  State of New Mexico Office District I 1625 N French Dr , Hobbs, NM 88240	Form C-103 June 19, 2008 WELL API NO.
District II I-FR 1.1.2000	30-025-03778
1301 W Grand Ave, Artesia, NM 88210	5. Indicate Type of Lease
1000 Rio Brazos Rd Azied DOOU 1220 Bouth St. 1 Ianeis Di.	STATE FEE
District IV 1220 S St Francis Dr., Santa Fe, NM	6. State Oil & Gas Lease No.
87505	
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)	7. Lease Name or Unit Agreement Name LOVINGTON SAN ANDRES UNIT
1. Type of Well: Oil Well Gas Well Other Tried	8. Well Number 4
2. Name of Operator CHEVRON MIDCONTINENT, L.P.	9. OGRID Number 241333 /
3. Address of Operator	10. Pool name or Wildcat
15 SMITH ROAD, MIDLAND, TEXAS 79705	LOVINGTON GRAYBRG SAN ANDRES
4. Well Location	
Unit Letter B: 660 feet from the NORTH line and 1980 feet from the EAST 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: SUBSEQUENT REPORT OF:	
NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK   PLUG AND ABANDON   REMEDIAL WORK   ALTERING CASING	
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐ COMMENCE DRILLING OPNS.☐ P AND A ☐	
PULL OR ALTER CASING  MULTIPLE COMPL  CASING/CEMENT JOB	
DOWNHOLE COMMINGLE	
OTHER: OTHER: MIT T	EST MUTH SHAPT
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 660 PSI FOR 30 MINUTES. (ORIGINAL CHART & COPY OF CHART ATTACHED).	
01-28-09: TEST CSG TO 500 PSI FOR 30 MINUTES. (ORIGINAL CHART & 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 DIMESTON TITLE REGULATORY SPECIALIST DATE 02-10-09	
Type or print name DENISE PINKERTON E-mail address: <u>leakejd@chevron.com</u> PHONE: 432-687-7375  For State Use Only	
A // // DISTRICT 1 SUPERVISOR	
APPROVED BY: TITLE DISTRICT Conditions of Approval (if any):	DATE FEB 1 3 2009
Conditions of Aspproval (II ally).	



10-23-08 # 3 96 MW Charr 10-23-08 # 30-86-01

39E S91 9E.81 NO39

