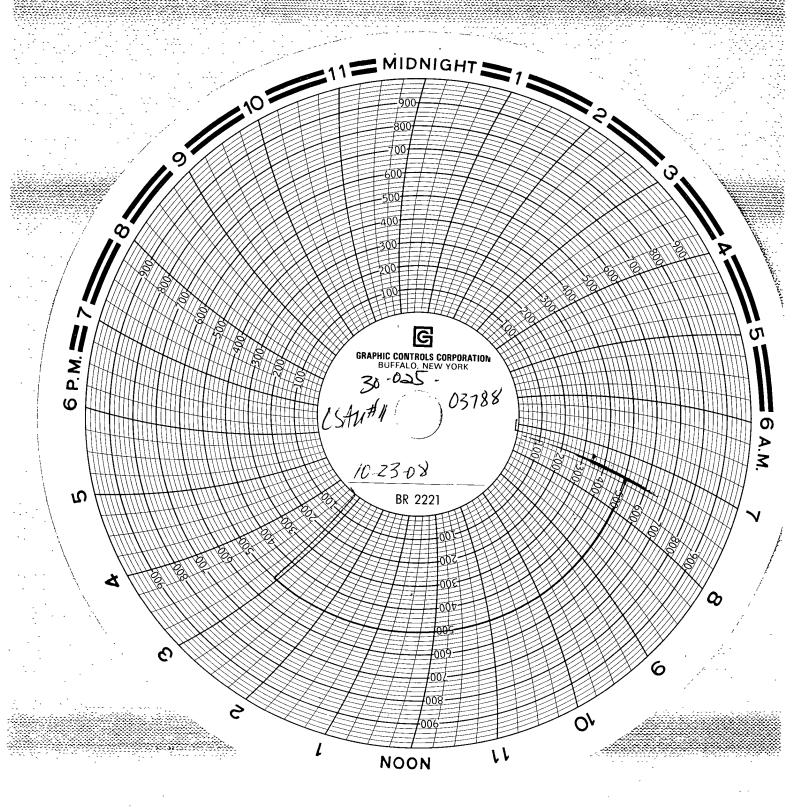
Submit 3 Copies To Appropriate District  State of New Mexico	Form C-103
Office District I  Office District I  Office District I	rces June 19, 2008
1625 N. French Dr., Hobbs, NM 88240  District II	WELL API NO. / 30-025-03788
1301 W Grand Ave, Artesia, NM 882 10 1 1 / OIL CONSERVATION DIVISIO	N 5. Indicate Type of Lease
District III 1220 South St. Francis Dr.	STATE FEE
1000 Rio Brazos Rd, Aztec, NM ROBBSOCD Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S St Francis Dr , Santa Fe, NM 87505	
SUNDRY NOTICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO DIFFERENT RESERVOIR USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS)	
1. Type of Well: Oil Well Gas Well Other Inject	8. Well Number 11
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 F: 1980 feet from the NORTH line and 1980 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.)	
	SUBSEQUENT REPORT OF: AL WORK ALTERING CASING ALTERING ALTERIN
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 1-23-09: TEST CSG TO 500 PSI FOR 30 MINUTES. (ORIGINAL CHART & COPY OF CHART ATTACHED).	
. Condition of the state of the	
Spud Date: Rig Release Date:	
I hereby certify that the information above is true and complete to the best of my kr	nowledge and helief
$\wedge$	towicage and benefit.
SIGNATURE CHILD TITLE REGULATORY	SPECIALIST DATE 02-10-09
Type or print name DENISE PINKERTON E-mail address: leakejd@chevro	n.com PHONE: 432-687-7375
For State Use Only	
APPROVED BY: Lange Of Approved (if Approved	
Conditions of Approval (if any):	



May May May May

20-23-08 20-23-08 WHY CHRI 10-33-08