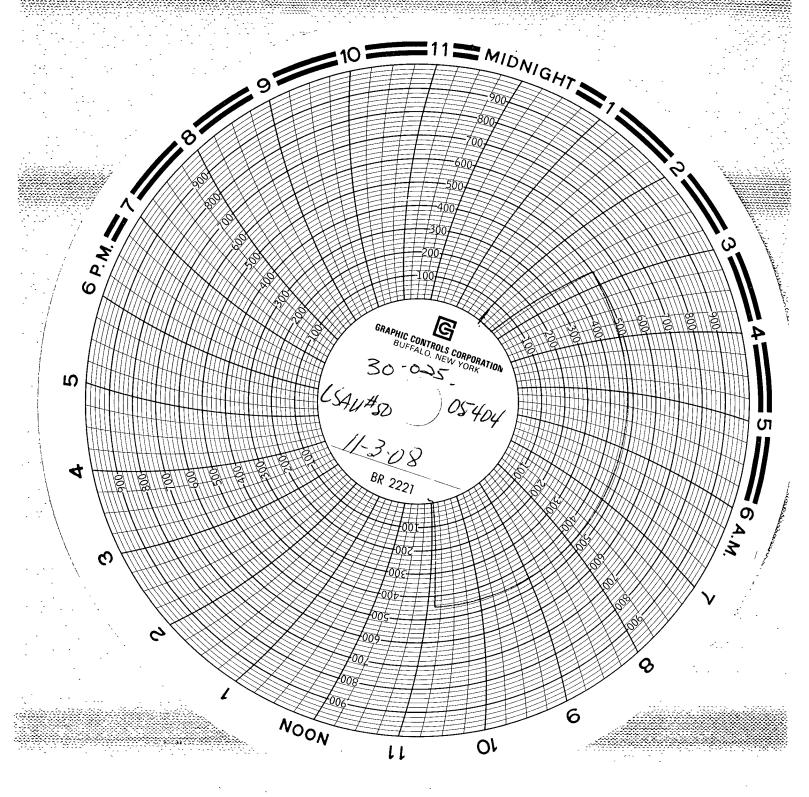
10g	ı
Submit 3 Copies To Appropriate District State of New Mexico	Form C-103
Office District 1 1635 N French Dr. Hebbs NM 88240	June 19, 2008
1023 N. FICHCH DI., FIODUS, NWI 88240	WELL API NO.
District II 1301 W Grand Ave , Artesia, NM 88210 1 1 2010 CONSERVATION DIVISION	30-025-05404
District III 1000 Rio Brazos Rd, Aztec, NM 8/40BBSOCD 220 South St. Francis Dr. Santa Fe, NM 87505	5. Indicate Type of Lease
1000 Rio Brazos Rd. Aztec. NM 8/40BBSOCD 220 South St. Francis Dr.	STATE S FEE
	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 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 Gas Well	8. Well Number 50
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 L: 1980 feet from the SOUTH line and 660 feet from the WE	
Section 6 Township 17-S Range 37-E NMPM	554115
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
12. Check rippropriate Box to marcate retaile of rectie	e, report of other bata
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WORK ☐ ALTERING CASING ☐	
	DRILLING OPNS. □ P AND A □
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEME	_
DOWNHOLE COMMINGLE	TM1 30B
DOWNHOLE COMMININGLE	
	TH 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	•
11-03-08: 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 knowle	dge and helief
Thereby certify that the information above is true and complete to the best of my knowle	age and benef.
\mathcal{A}	
SIGNATURE VIMIL JUNE TITLE REGULATORY SPEC	CIALIST DATE 02-10-09
Type or print name DENISE PINKERTON E-mail address: leakejd@chevron.cor	n DHONE: 422 687 7275
Type or print name DENISE PINKERTON E-mail address: <u>leakejd@chevron.com</u> PHONE: 432-687-7375 For State Use Only	
// // rcp 1 3 2000	
APPROVED BY: TITLE DISTRICT 1 SUPERVISOR DATE	
Conditions of Approval (if any):	
· V · ·	



1980 S 660 W L-6 175 37E

> 11-3-08 11-3-08 11-3-08 11-3-08 11-3-08