Submit One Copy To Appropriate District Office District I State of New Mexico Energy, Minerals and Natural Resources	Form C-103 March 18, 2009
/ CO # 3 7 T	WELL API NO. 30-025-06916
	5. Indicate Type of Lease
District III HOBBSOCIU220 South St. Francis Dr.	STATE FEE X
District IV	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 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 V.M.Henderson
1. Type of Well: X Oil Well Gas Well Other	8. Well Number #10
2. Name of Operator	9. OGRID Number
Chevron USA Inc. 3. Address of Operator	10. Pool name or Wildcat
15 Smith Road, Midland, Texas 79705	Paddock
4. Well Location	,
Unit Letter D: 660 feet from the North line and 660 feet from the West line	
Section 30 Township 21S Range 37E 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:	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING	
TEMPORARILY ABANDON	
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMEN	T JOB
OTHER: Description Desc	
X All pits have been remediated in compliance with OCD rules and the terms of the Operator's pit permit and closure plan.	
X Rat hole and cellar have been filled and leveled. Cathodic protection holes have been properly abandoned.	
X A steel marker at least 4" in diameter and at least 4' above ground level has been set in concrete. It shows the	
OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, QUARTER/QUARTER LOCATION OR UNIT	
<u>LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATION HAS BEEN WELDED OR PERMANENTLY STAMPED ON THE MARKER'S SURFACE.</u>	
STAINTED ON THE MARKER S SURFACE.	
X The location has been leveled as nearly as possible to original ground contour and has been cleared of all junk, trash, flow lines and other	
production equipment. X Anchors, dead men, tie downs and risers have been cut off at least two feet below ground level.	
If this is a one-well lease or last remaining well on lease, the battery and pit location(s) have been remediated in compliance with OCD	
rules and the terms of the Operator's pit permit and closure plan. All flow lines, production	equipment and junk have been removed from
lease and well location.	
X All metal bolts and other materials have been removed. Portable bases have been removed. (Poured onsite concrete bases do not have to be removed.)	
X All other environmental concerns have been addressed as per OCD rules.	
X Pipelines and flow lines have been abandoned in accordance with 19.15.35.10 NMAC. All fluids have been removed from non-retrieved	
flow lines and pipelines.	
When all work has been completed, return this form to the appropriate District office to schedule an inspection.	
SIGNATURETITLEProduction Team L	eaderDATE04-21-2009
TYPE OR PRINT NAME E-MAIL:	PHONE:
For State Use Only	FRONE;
APPROVED BY: Washingtown TITLE (JMP. Of	DATE 4-23-09
Conditions of Approval (if any):	DATE 4-23-U9