Submit 3 Copies To Appropriate District State of New Mexico Office District 1 RECEIVE Minerals and Natural Resource	Form C-103
1625 N French Dr., Hobbs, NM 88240 District II	30-025-25694
District III 1000 Rio Brazos Rd , Aztec, NM 874 6 OBBSOCI220 South St. Francis Dr. District IV Santa Fe, NM 87505	
1000 Rio Brazos Rd , Aztec, NM 874 0 UBD South Santa Fe, NM 87505	STATE FEE -
1220 S. St Francis Dr., Santa Fe, NM	o. State off & Sus Louise 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	7. Lease Name or Unit Agreement Name CENTRAL DRINKARD UNIT
DIFFERENT RESERVOIR USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH	
PROPOSALS)     1. Type of Well: Oil Well     Gas Well   Other	8. Well Number 419
2. Name of Operator /	9. OGRID Number 4323
CHEVRON U.S.A. INC.	
3. Address of Operator15 SMITH ROAD, MIDLAND, TEXAS 79705	10. Pool name or Wildcat DRINKARD
4. Well Location	
Unit Letter L: 1631 feet from the SOUTH line and 260 feet from the WEST line	
Section 28 Township 21-S Range 37-E NM	
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 CHANGE PLANS COMMENCE DRILLING OPNS. PAND A	
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB	
	TA STATUS 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.	
6-12-09: PRESSURE TEST TO 580 PSI FOR 30 MINS. (ORIGINAL CHART & COPY OF CHART ATTACHED).	
CIBP SET @ 6432'.	
WELL IS TEMPORARILY ABANDONED. This Approval of Temporary Abandonment Expires <u>6-26-2011</u>	
Abandonment Expires 6-26-2011	
Barro surver a detter sudet a	
Spud Date: Rig Release Date:	··· War of a balance de la ser a windows and a ser of the series
I hereby certify that the information above is true and complete to the best of my know	vledge and belief.
Ř O	
SIGNATURE MISE INterton TITLE REGULATORY SPECIALIST DATE 06-23-2009	
Type or print name DENISE DINKEDTON E mail address: lasksid@shayman.com DUONE: 432 (87.7275	
Type or print name DENISE PINKERTON       E-mail address: leakejd@chevron.com       PHONE: 432-687-7375         For State Use Only       //	
APPROVED BY: AMJ JUN 26 2009 Conditions of Approval (if any):	
V	

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