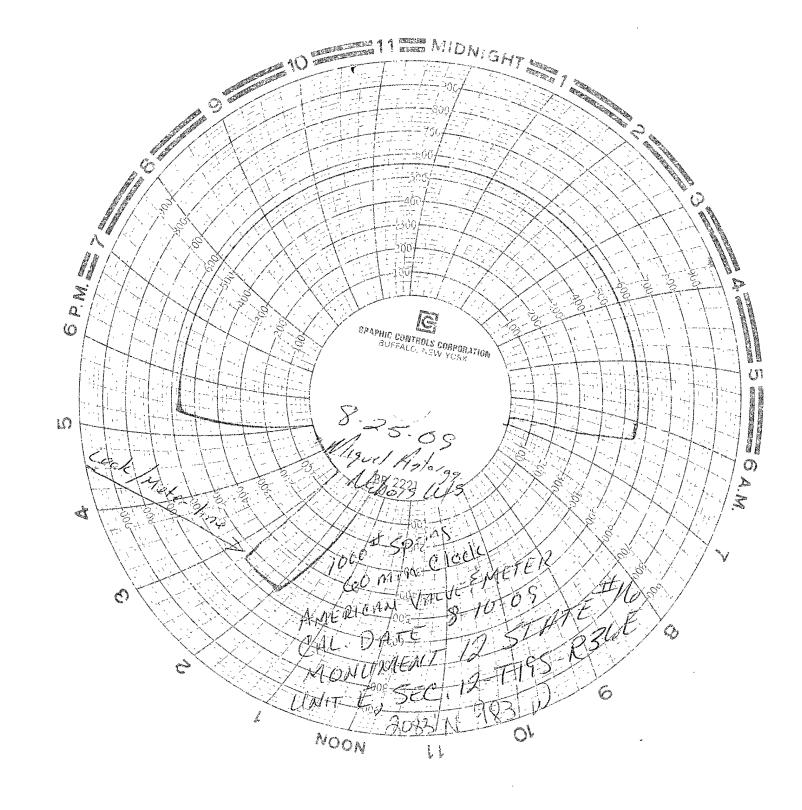
Submit 3 Copies To Appropriate District Office	State of New Mexico	Form C-103
District I Energy	, Minerals and Natural Resources	WELL API NO. June 19, 2008
1625 N French Dr., Hobbs, NM 88249 District II 1301 W Grand Ave., Artesia, NM 88210		30-025-34152 5. Indicate Type of Lease
District III 1000 Bro Brook Bd. Arton NM 8741 SEP 10 2000 1220 South St. Francis Dr.		STATE FEE
District IV 1220 S. St Francis Dr, Santa Fe, NAOBBSOCD 87505		6. State Oil & Gas Lease No.
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		7. Lease Name or Unit Agreement Name MONUMENT "12" STATE
PROPOSALS) 1. Type of Well: Oil Well Gas Well	Other	8. Well Number 16
2. Name of Operator CHEVRON U.S.A. INC.		9. OGRID Number 4323
3. Address of Operator 15 SMITH ROAD, MIDLAND, TEXAS 79705		10. Pool name or Wildcat MONUMENT ABO, N
4. Well Location		
Unit Letter E: 2083 feet from the NORTH line and 983 feet from the WEST line Section 12 Township 19-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: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING COMMENCE DRILLING OPNS. P AND A DOWNHOLE COMMINGLE CASING/CEMENT JOB CASING/		
OTHER:	OTHER: TEM	IPORARILY ABANDON WITH CHART
 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. CIBP IS SET @ 7076. RAN MIT. TEST CSG TO 560 PSI FOR 30 MINS. (ORIGINAL CHART & COPY OF CHART 		
ATTACHED). This Approval of Temporary 9-11-2011		
WELL IS TEMPORARILY ABANDONED. Abandonment Expires		
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 TIMES TITLE REGULATORY SPECIALIST DATE 09-09-2009		
Type or print name DENISE PINKERTON E-mail address: <u>leakejd@chevron.com</u> PHONE: 432-687-7375		
For State Use Only SEP 11 2009		
APPROVED BY: TITLE DISTRICT 1 SUPERVISOR DATE Conditions of Approval (if any):		



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