Submit 3 copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

DISTRICT I

P.O. Box 1980, Hobbs, NM 88240 DISTRICT II

DIS

100

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe. New Mexico 87504-2088

WELL API NO. 3002530502

5. Indicate Type of Lease

D. Box Drawer DD, Artesia, NWI 66210	STATE 🗸 FEE
STRICT III	
00 Rio Brazos Rd., Aztec, NM 87410	6. State Oil / Gas Lease No. B-7897
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMI (FORM C-101) FOR SUCH PROPOSALS.	7. Lease Name or Unit Agreement Name STATE -P-
Type of Well: OIL GAS ☐ OTHER	
Name of Operator CHEVRON USA INC	8. Well No. 14
Address of Operator 15 SMITH ROAD, MIDLAND, TX 79705	9. Pool Name or Wildcat LOVINGTON, UPPER PENN N
Well Location	
Unit Letter F : 1830 Feet From The NORTH Line and 1980	Feet From TheWESTLine
Section 32 Township 16S Range 37E NM	IPM <u>LEA</u> COUNTY

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

10. Elevation (Show whether DF, RKB, RT,GR, etc.)

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK		PLUG AND ABANDON		REMEDIAL WORK ALTERING CASING	
TEMPORARILY ABANDON		CHANGE PLANS		COMMENCE DRILLING OPERATION PLUG AND ABANDONMENT	г 🗀
PULL OR ALTER CASING				CASING TEST AND CEMENT JOB	
OTHER:			🗆	OTHER: REQUEST TA STATUS	~

3833' KB

12-02-02: TIH W/CIBP & SET @ 11,040'. TEST CSG & CIBP TO 560# FOR 30 MINS-TEST FAILED. 12-03-02: TEST TO 540# FOR 30 MINS - OK. (ORIGINAL CHART & COPY OF CHART ATTACHED)

WELL IS TEMPORARILY ABANDONED.

****THIS IS AN AMENDED REPORT TO CORRECT THE POOL NAME TO THE LOVINGTON, UPPER PENN. ORIGINALLY THE REPORT WAS SENT IN SHOWING THE MONUMENT-STRAWN AS THE POOL.

THIS AMENDED REPORT SHOULD PROVE TO REMOVE THIS WELL FROM THE NONCOMPLIANCE LIST.

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I hereby certify that the information above is t	rue and complete to the best of my knowledge and t	belief.			
	1. 11al Market	TITLE_	Regulatory Specialist	DATE	8/25/2003
TYPE OR PRINT NAME	Denise Leake			Telephone No.	915-687-7375

APPROVED CONDITIONS OF APPROVAL, IF ANY:

PETROLEUM ENGINEER

DATE

^{12.} 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.