

Submit One Copy To Appropriate District	State of New Me	exico NOV 23	el d	Form C-103
Office .	State of New Me Energy, Minerals and Natu	ral Radiolega	('N ₀).	March 18, 2009
<u>District I</u> 1625 N. French Dr., Hobbs, NM 88240	Energy, willierars and water	uai Keamaa 20	WELL API NO. /	171dren 10, 2009
OIL CONCEDIVATION DIVIGION		30-025-35501		
1301 W. Grand Ave., Artesia, NM 88210 District III	1220 South St. Francis Dr.		5. Indicate Type of Lease	/
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505			EE X
District IV 1220 S. St. Francis Dr., Santa Fe, NM		6. State Oil & Gas Lease I	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 DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)			7. Lease Name or Unit Agreement Name JR Phillips	
1. Type of Well: X Oil Well Gas Well Other			8. Well Number 16	
2. Name of Operator Chevron USA, Inc			9. OGRID Number	
3. Address of Operator PO Box 7139 Midland, Texas 79708			10. Pool name or Wildcat Monument ABO	
4. Well Location				. 200
Unit Letter F: 1650 feet	from the North line and 2273 fee	t from the West line	/	
l .		County Lea	✓	
11. Elevation (Show whether DR, RKB, RT, GR, etc.)				
	3575 GL		7 3.1.7 4.2.	
12. Check Appropriate Box to I	ndicate Nature of Notice, R	Report or Other D	ata	
NOTICE OF INTE	ENTION TO:	SUBS	SEQUENT REPORT	OF·
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK				NG CASING 🔲
TEMPORARILY ABANDON			LING OPNS. P AND A	A 🗆 _
PULL OR ALTER CASING N	MULTIPLE COMPL	CASING/CEMENT	JOB 🗌	
OTHER:		X Location is rea	dy for OCD inspection after	or D.S.A
OTHER: X Location is ready for OCD inspection after P&A All pits have been remediated in compliance with OCD rules and the terms of the Operator's pit permit and closure plan.				
Rat hole and cellar have been filled and leveled. Cathodic protection holes have been properly abandoned.				
A steel marker at least 4" in diame	ter and at least 4' above ground	level has been set in	concrete. It shows the	
OPERATOR NAME LEAS	E NAME: WELL NUMBER /	API NIIMRED AII	ADTED/OHADTED LOC	ATION OD
OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, QUARTER/QUARTER LOCATION OR UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATION HAS BEEN WELDED OR				
PERMANENTLY STAMPE	D ON THE MARKER'S SUR	FACE.		<u> </u>
✓ The least and and and and a decided	. 1	1	1 1 2 11 1	
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.				
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. All metal bolts and other materials l	rave been removed. Portable be	gag hava baan ramay	ad (Daymad amaika a a a a a	1
to be removed.)	lave been removed. Tortable ba	ises have been remov	ed. (Poured onsite concrete	bases do not nave
All other environmental concerns l	nave been addressed as per OCD	rules.		
Pipelines and flow lines have been	abandoned in accordance with 1	9.15.35.10 NMAC.	All fluids have been remove	ed from non-
retrieved flow lines and pipelines.				
When all work has been completed, retu	ern this form to the appropriate I	District office to sche	dule an inspection.	
SIGNATURE	ellantitle F	rodution Team Lead	erDATE11-19	-2009
TYPE OF PROPERTY				
TYPE OR PRINT NAME Larry William For State Use Only	msE-MAIL: lcwl@e	chevron.com	PHONE: _57.	5-394-1247
Tot State Ose Only	1.	_ /		11
APPROVED BY:	TITLE		The second	1/11/10

Conditions of Approval (if any):