| Submit 3 Copies To Appropriate District   | State of New  | / Mexico  |  | Form C   |             |
|---|---|---|--|--|-------------|
| Office District I   | State of New Mexico  Free Minerals and Natural Resources  OIL CONSERVATION DIVISION |   | WELL API NO.                                       | March 4,   | 2004        |
| District II   | N GONGEDWAT   | ION DIVISION  | 30-025-038   |  |             |
| District II 1301 W Grand Ave, Artesia, NM 88210 District III 1000 Rio Brazos Rd, Aztec, NM 87410  OIL CONSERVATION DIVISION 9 2011220 South St. Francis Dr. Santa Fe, NM 87505  |   | 5. Indicate Type STATE                              | of Lease<br>☐ FEE ☑                                |  |             |
| 1000 Rio Brazos Rd , Aztec, NM 87410 Santa Fe, NM 87505   |   |   | 6. State Oil & Ga                                  |  |             |
| 1220 S St Francis Dr , Santa Fe, NM OBBSOUD   |   |   |  |  |             |
| SUNDRY NOTICES AT   | ND REPORTS ON WI  | ELLS  | 7. Lease Name o                                    | r Unit Agreement Na  | me          |
| (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  |   |   | West Lovington                                     | n Unit   |             |
| PROPOSALS)  |   |   | 8. Well Number                                     |  |             |
| 1. Type of Well: Oil Well ☑ Gas Well ☑ Other Water Injection Well   |   |   | 6  |  |             |
| 2. Name of Operator   |   |   | 9. OGRID Numb                                      | per /  |             |
| Chevron Midcontinent, L.P.  |   |   | 4323   | /  |             |
| 3. Address of Operator #15 Smith Rd., Midland, Tx 79705   |   |   | 10. Pool name or Lovington Grayb                   | r Wilderton<br>Durg Andres W   |             |
| 4. Well Location  | ianu, 1x 79705  |   | Lovington <del>grayu</del>                         | Andres W   |             |
| •   |   | ما الم  | 1000   | . Fact   | .           |
| Unit Letter B : 660   | feet from the   | line and  | 1980 feet fro                                      | om theEast   | line        |
| Section 4   | Township 17-S   | Range 36-E  | NMPM Lea   | County · /   |             |
|   |   | er DR, RKB, RT, GR, etc.                            |  |  | 177         |
| Pit or Below-grade Tank Application (For pit or b   | - Landa tank alagunas   | Form C 144 must be attach                           | ad)  | 340  | <u> </u>    |
| Pit Location: UL B Sect 4 Twp 17S Rng   | - 36F Die tung Steel  | Depth to Groundwater                                | Distance from n                                    | earest fresh water well  | )ver 1000   |
| Distance from nearest surface waterB  |   |   |  | <u></u>  |             |
| 593 feet from the North line and 1980 f   |   |   |  |  |             |
| 333 feet from the 140101 line and 1300 li   | eet from theimc   |   |  |  | -           |
|   | 1 1 5 1 111   |   |  |  |             |
|   |   | ate Nature of Notice,                               | SEQUENT RE   |  | _           |
| NOTICE OF INTENT PERFORM REMEDIAL WORK □ PLUG   | HON TO.<br>GAND ABANDON ☐   | l l   |  | ALTERING CASING  | з □         |
|   |   |   | r  |  |             |
| _   | NGE PLANS   | 1   | ILLING OPNS 🗌                                      | PLUG AND<br>ABANDONMENT  | ✓           |
| PULL OR ALTER CASING , MUL  | TIPLE   | CASING TEST A                                       | ND .   |  |             |
| , COM   | IPLEȚION ,  | CEMENT JOB  | •  |  |             |
| PULL OR ALTER CASING MULCOM  OTHER  13. Describe proposed or completed or of starting any proposed work). Since or recompletion.  1. Notified OCD 24 hrs prior to MIRU to P & A 2. Tag PBTD@4460' Spot 25sx Cmt F/4460'-4.  3. Displace Hole w/MLF 9 5# Brine w/12 5# get 4. Per@3098'. Unable to FPIR Spot 35sx Cmt. |   | OTHER   | 14   |  | . 🗆         |
| 13. Describe proposed or completed o  | perations. (Clearly sta   | te all pertinent details, ar                        | nd give pertinedat                                 | es including estimat   | ed date     |
| of starting any proposed work). Si  | EE RULE 1103. For N   | Aultiple Completions: A                             | ttach wedter of ding                               | ram emproposed com   | pletion     |
| or recompletion.  |   |   | Forms may be                                       | cam with posed com<br>is then dis retained pendi<br>sequent Report of Well p<br>nrd.state.nm.us/ocd. | ily;        |
| <ol> <li>Notified OCD 24 hrs prior to MIRU to P &amp; A</li> <li>Tag PBTD@4460' Spot 25sx Cmt F/4460'-4</li> </ol>  | 1223' 7/1/10  |   | Witt W. CITI                                       | nrd at OCD by Well p   | ng receipt  |
|   |   |   | H@2880' 7/1/10                                     | mate,nm,us/ord   | ugging)     |
| 4. Perf@3098' Unable to EPIR Spot 35sx Cmt<br>5. Perf@2220' Unable to EPIR Spot 45sx Cmt  | (5 1/2x/ //8) F/3148-290<br>FF/2270'-1900' (T Salt/She                              | oe. 5 1/2x 7 7/8 & 8 5/8) WC                        | C Tag@1856' 7/2/10                                 | 3.0.   |             |
| <ol><li>6. Perf@400' &amp; SQZ 150sx Cmt F/400'-Surf (F</li></ol>   | r Wtr/Shoe, surf 5 1/2x8  | 5/8x11 & 13 3/8) WOC Tag                            | ged@surf 7/5/10                                    |  |             |
| 7. Install Dry Hole Marker 7/6/10   |   | 1 1 4 6 1 1-1-1                                     | dhaliaf re u                                       | 4°C 41-4   | holow       |
| I hereby certify that the information above grade tank has been/will be constructed or closed a   | is true and complete to<br>ecording to NMOCD guid                                   | the best of my knowled<br>elines , a general permit | ge and belief. I furti<br>] or an (attached) alter | ner certify that any pit of<br>native OCD-approved pl  | an □.       |
| 11./6/  |   |   |  |  |             |
| SIGNATURE SIGNATURE   | Z TIT   | LE MANAGER  | <del>-</del>                                       | DATE   | <del></del> |
| Type or print name Jimmy BA   | sity E-n  | nail address: sunsetwells                           | ervice@yahoo.com T                                 | elephone No. 432-5   | 61-8600     |
| (This space for State use)  |   |   |  |  |             |
| (This space for State use)  |   |   |  |  |             |
| APPPROVED BY  | heTITI  | E STAFFI  | NGE.   | DATE 7-12-   | 10          |
| Conditions of approval, if any:   |   |   |  |  |             |

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