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Submit 3 Copies To Appropriate District
Office Form C-103 State of New Mexico HOBBS Cherry, Minerals and Natural Resources March 4, 2004 District I WELL API NO. 1625 N French Dr , Hobbs, NM 88240 30-025-31569 District II OIL CONSERVATION DIVISION 1301 W Grand Ave, Artesia, NM 88210 5. Indicate Type of Lease 1220 South St. Francis Dr. District III STATE FEE 1000 Rio Brazos Rd, Aztec, NM 87410 Santa Fe, NM 87505 6. State Oil & Gas Lease No. District IV 1220 S St Francis Dr , Santa Fe, NM SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name (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 Lovington Paddock Unit PROPOSALS) 8. Well Number 1. Type of Well: Gas Well / Other 4njection-Oil Well 135 9. OGRID Number 2. Name of Operator 241333 Chevron Midcontinent, L.P. 10. Pool name or Wildcat 3. Address of Operator Lovington Paddock #15 Smith Rd., Midland, Tx 79705 4. Well Location 2485 137 North East Unit Letter feet from the line and feet from the line Township 17-S 37-E Range Section County 11. Elevation (Show whether DR, RKB, RT, GR, etc.) Pit or Below-grade Tank Application (For pit or below-grade tank closures, a form C-144 must be attached) Distance from nearest fresh water well Over 1000' Pit Location: UL B Sect 6 Twp 17S Rng 37E Pit type Steel ____Depth to Groundwater___ Sect Twp Distance from nearest surface water______ Below-grade Tank Location UL_ Rng 137 feet from the North line and 2485 feet from the East line 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data SUBSEQUENT REPORT OF: NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING **TEMPORARILY ABANDON CHANGE PLANS** П COMMENCE DRILLING OPNS **PLUG AND** \checkmark **ABANDONMENT** CASING TEST AND MULTIPLE PULL OR ALTER CASING **CEMENT JOB** COMPLETION OTHER: OTHER 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. 8 7/29/10 Perf@400' Unable to EPIR Spot 65sx C Cmt 1 Notified OCD 24 hrs prior to MIRU to P & A equipment. 7/27/10 2 7/28/10 Tag CIBP@5971' Spot 25sx C Cmt F/5971'-5771' (Paddock) F/450' to Surf (WB/Surf) 3. 7/28/10 Displ Hole w/MLF, 9 5# Brine w/25# Gel P/BBL ff Wellhead Install Dry Hole Marker Approved for plugging of well bore only. 9 7/30/10 Cutof 4 7/28/10 Spot 25sx C Cmt F/4700'-4500' (San Andres) Liability under bond is retained pending receipt 5. 7/28/10 Spot 30sx C Cmt F/3150'-2900' (Yates/B.Salt) of C-103 (Subsequent Report of Well Plugging) 6. 7/28/10 Spot 25sx C Cmt F/2100'-1900' (T Salt) which may be found at OCD Web Page under 7. 7/29/10 Perf@1435' Unable to EPIR Spot 35sx C Cmt F/1485'-1235' (Shoe) WOC Tagged@1155' I hereby certify that the information above is true and complete to the best of my knowledge and benefit the information above is true and complete to the best of my knowledge and benefit the information above is true and complete to the best of my knowledge and benefit the information above is true and complete to the best of my knowledge and benefit the information above is true and complete to the best of my knowledge and benefit the information above is true and complete to the best of my knowledge and benefit the information above is true and complete to the best of my knowledge and benefit the information above is true and complete to the best of my knowledge and benefit the information above is true and complete to the best of my knowledge and benefit the information above is true and complete to the best of my knowledge and benefit the information above is true and complete to the best of my knowledge and benefit the information above is true and complete to the best of my knowledge and benefit the information above is true and complete to the best of my knowledge and benefit the information above is true and complete to the best of my knowledge and benefit the information above is true and complete to the best of my knowledge and benefit the information above is true and complete to the best of my knowledge and benefit the information above is true and the information above it is the information a grade tank has been/will be constructed or closed according to NMOCD guidelines [], a general permit [] or an (attached) alternative OCD-approved plan []. DATE 8-2-10 TITLE MANAGER **SIGNATURE** E-mail address: sunsetwellservice@yahoo.com Telephone No. 432-561-8600 Type or print name Immu (This space for State use) APPPROVED BY Conditions of approval, if any