

RECEIVED

SEP 27 2010

HOBBSON

Submit 3 Copies To Appropriate District Office
 District I
 1625 N French Dr., Hobbs, NM 88240
 District II
 1301 W Grand Ave., Artesia, NM 88210
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 1220 S St Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

Form C-103
 March 4, 2004

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)		WELL API NO. 30-025-31461 ✓
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/> ✓		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> ✓
2. Name of Operator Chevron Midcontinent, L.P. ✓		6. State Oil & Gas Lease No. B-4120
3. Address of Operator #15 Smith Rd., Midland, Tx 79705		7. Lease Name or Unit Agreement Name West Lovington Unit (26753) ✓
4. Well Location Unit Letter <u>F</u> : <u>2410</u> feet from the <u>North</u> line and <u>2540</u> feet from the <u>West</u> line Section <u>8</u> Township <u>17-S</u> Range <u>36-E</u> NMPM <u>Lea</u> County		8. Well Number 96
11. Elevation (Show whether DR, RKB, RT, GR, etc)		9. OGRID Number 241333
10. Pool name or Wildcat Lovington; Upper San Andres, West ✓		

Pit or Below-grade Tank Application (For pit or below-grade tank closures, a form C-144 must be attached)

Pit Location: UL F Sect 8 Twp 17S Rng 36E Pit type Steel Depth to Groundwater _____ Distance from nearest fresh water well Over 1000'
 Distance from nearest surface water _____ Below-grade Tank Location UL _____ Sect _____ Twp _____ Rng _____ ;
2410 feet from the North line and 2540 feet from the West line

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☒
 TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
 PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐
 OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
 COMMENCE DRILLING OPNS ☐ PLUG AND ABANDONMENT ☒
 CASING TEST AND CEMENT JOB ☐
 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.

- 9/20/10 Notified OCD 24 hrs prior to MIRU to P & A equipment
- 9/22/10 Tag CIBP@4685' Spot 25sx C Cmt F/4685'-4485' (S. Andres)
- 9/22/10 Displace Hole w/MLF, 9.5# Brine w/25# Gel P/BBL
- 9/22/10 Spot 25sx C Cmt F/3150'-2950' (B. Salt Est)
- 9/22/10 Spot 25sx C Cmt F/2150'-1950' (T. Salt Est)
- 9/22/10 Perf@1425' Unable to EPIR Spot 35sx C Cmt@1475' (Shoe)
 WOC Tagged@1170'

- 9/22/10 Spot 50sx C Cmt F/400'-Surf (Fr Wtr/ Surf)
 WOC Tagged@Surf 9/23/10
- 9/23/10 Install Dry Hole Marker

Approved for plugging of well bore only.
 Liability under bond is retained pending receipt
 of C-103 (Subsequent Report of Well Plugging)

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD approved plan ☐.

SIGNATURE Jimmy Babley TITLE MANAGER DATE 9-23-10
 Type or print name Jimmy Babley E-mail address: sunsetwellservice@yahoo.com Telephone No. 432-561-8600

(This space for State use)

APPROVED BY [Signature] TITLE STAFF MGR DATE 9-28-10
 Conditions of approval, if any: