Submit 1 Copy To Appropriate District Office District I  HOBBS OCD State of New Mexico Energy, Minerals and Natural Resources	Form C-103 October 13, 2009
1635 N. Canada De. Llokho NM 99340	WELL API NO.
District II APR 2712HDNGEDVATION DIVISION	30-025-32162
District III 1220 South St. Francis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd Aztec NM 87410	STATE FEE
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	6. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name West Dollarhide Drinkard Unit
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)  1. Type of Well: Oil Well  Gas Well  Other Water Injection Well	8. Well Number 140
2. Name of Operator	9. OGRID Number, 12 22
Chevron USA INC	43231
3. Address of Operator 15 Smith Road Midland TX 79705 432-687-7375	10. Pool name or Wildcat  Dollarhide Tubb Drinkard
	Donathue Tubb Difficatu
4. Well Location Unit Letter J: 1980 feet from the South line and 1850 feet from the East line	
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Section 32 Township 24S Range 38E  11. Elevation (Show whether DR, RKB, RT, GR, etc.	
3195' GR	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☑ PLUG AND ABANDON ☐ REMEDIAL WORK ☐ ALTERING CASING ☐	
TEMPORARILY ABANDON	
PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMEN	T JOB 🔲
DOWNHOLE COMMINGLE	
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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.	
Perform remedial work on water injection well. Tubing/Packer Leak.	
Note: Packer set @ 6432'	
Top of perforations: 6457'	
Perforations from: 6457-6612'	
Periorations from: 0437-0012	
Per Underground Injection Control Program Manual Condition	of Approval: Notify OCD Hobbs
Office 24 hours prior of rupping MIT To a contract of rupping MIT To a con	
feet of the uppermost injection perfs or open hole.	
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ine best of my knowledg	e and belief.
SIGNATURE Sove Nortell TITLE: Petroleum Engineer	DATE: April 27, 2011
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Type or print name Ivone Wardell E-mail address: <u>ivoe@chevron.c</u>	om PHONE: 432-687-7440
For State Usc Only	
APPROVED BY TITLE STAFF MGE DATE 7- 27-7011	
Conditions of Approval (if any):	