| Submit 3 Copies To Appropriate District   |  |             | Form C-1                      | 03                   |                                  |                                     |          |  |  |
|---|--|-------------|-------------------------------|----------------------|----------------------------------|-------------------------------------|----------|--|--|
| Office  | State of Nev<br>Energy, Minerals and   |             |                               |                      |                                  | Revised March 25, 19                | 99       |  |  |
| District I  |  | -           |                               | WELL AP              | INO.                             |                                     | ٦        |  |  |
| 1625 N. French Dr., Hobbs, NM 87240<br>District II  | OIL CONSERVA   |             | 30-025-04800                  |                      |                                  |                                     |          |  |  |
| 811 South First, Artesia, NM 87210  |  | 5. Indicate | e Type of                     | Lease                |                                  |                                     |          |  |  |
| District III  | 2040 South   |             |                               |                      |                                  | FEE                                 |          |  |  |
| 1000 Rio Brazos Rd., Aztec, NM 87410<br>District IV   | Santa Fe, N  | 18 1018     | 505                           |                      |                                  |                                     | -        |  |  |
| 2040 South Pacheco, Santa Fe, NM 87505  |  |             |                               | 6. State O           | ul & Gas I                       | Lease No.                           |          |  |  |
| SUNDRY NOT<br>(DO NOT USE THIS FORM FOR PROI<br>DIFFERENT RESERVOIR. USE "APPL<br>PROPOSALS.) | ICES AND REPORTS ON<br>POSALS TO DRILL OR TO DEE<br>LICATION FOR PERMIT" (FORM | PEN O       | R PLUG BACK TO A              | 7. Lease N           | Name or U                        | nit Agreement Name:                 |          |  |  |
| 1. Type of Well:  |  |             |                               |                      | W. A. RAMSAY (NCT-A)             |                                     |          |  |  |
| Oil Well X Gas Well Other<br>2. Name of Operator  |  |             |                               |                      | 8. Well No.                      |                                     |          |  |  |
| -   |  |             |                               |                      | 45                               |                                     |          |  |  |
| Chevron U.S.A. Inc.<br>3. Address of Operator   |  |             |                               |                      | 9. Pool name or Wildcat          |                                     |          |  |  |
| <b>P.O. Box 1150 Midland, TX 79702</b>  |  |             |                               |                      | ELMONT; YATES-7 RVRS-QUEEN (OIL) |                                     |          |  |  |
| 4. Well Location  | ,,,,,,,,   |             |                               |                      |                                  |                                     |          |  |  |
|   | 1000 0 0 0   | 500         | TT line and                   | 1980                 | feet from                        | the WESTlir                         |          |  |  |
| Unit LetterK:   | <b>1980</b> feet from the  |             | TH line and                   | 1000                 |                                  |                                     |          |  |  |
| Section 27  | Township 21  |             | Range 36E                     | NMPM                 |                                  | County LEA                          | -5       |  |  |
|   | 10. Elevation (Show wh   | ether l     | DR, RKB, RT, GR, et           | c.)                  |                                  | anna an an ann ann ann ann an an an | 1.<br>1. |  |  |
| 11. Check   | Appropriate Box to Ind   | licate      | Nature of Notice,             | Report, o            | r Other I                        | Data                                |          |  |  |
| NOTICE OF INTENTION TO:   |  |             |                               | UBSEQUENT REPORT OF: |                                  |                                     |          |  |  |
|   | PLUG AND ABANDON   | X           | REMEDIAL WORK                 |                      |                                  | ALTERING CASING                     |          |  |  |
|   | CHANGE PLANS   |             | COMMENCE DRILLING OPNS.       |                      |                                  | PLUG AND<br>ABANDONMENT             |          |  |  |
| PULL OR ALTER CASING  | MULTIPLE<br>COMPLETION   |             | CASING TEST AND<br>CEMENT JOB |                      |                                  |                                     |          |  |  |
| OTHER:  |  |             | OTHER:                        |                      |                                  |                                     | _□       |  |  |

12. 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 recompilation.

## CHEVRON PROPOSES TO P&A PER ATTACHED PROCEDURE

THE COMMISSION MUST BE NOTIFIED 24 HOUSS PRIOR TO THE BEGINNING OF PLUGGING OPERATIONS FOR THE C-103 TO BE APPROVED.

| SIGNATURE_ J.K. Ripley                         | TITLE REGULATORY O.A |                                       | DATE9/27/01   |               |  |  |
|--|----------------------|---------------------------------------|---------------|---------------|--|--|
| Type or print name J. K. RIPLEY                |                      |                                       | Telephone No. | (915)687-7148 |  |  |
| (This space for State use)                     |                      | · · · /                               |               | - 1           |  |  |
| APPROVED BY<br>Conditions of approval, if any: |                      | · · · · · · · · · · · · · · · · · · · | DATE          |               |  |  |