Submit 1 Copy To Appropriate District Office	State of New Mexico		Form C-103
District I – (575) 393-6161 Energy, Minerals and Natural Resources			Revised July 18, 2013
District II (575) 749 1292			WELL API NO. 30-025-25802
District II - (575) 748-1283 811 S. First St., Artesia, NM 88210 OIL CONSERVATION DIVISION			5. Indicate Type of Lease
811 S. First St., Artesia, NM 88210  District III – (505) 334-6178  1000 Rio Brazos Rd., Aztec, NM 87410 N  Santa Fe, NM 87505  Santa Fe, NM 87505			STATE S FEE
District IV – (505) 476-3460 Santa Fe, NM 87505			6. State Oil & Gas Lease No.
District IV – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505  SLINDRY NOTICES AND REPORTS ON WELLS			
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 PROPOSALS.)			CENTRAL VACUUM UNIT
1. Type of Well: Oil Well Gas Well Other INJECTOR			8. Well Number 121
2. Name of Operator			9. OGRID Number 4323
CHEVRON USA INC			
3. Address of Operator			10. Pool name or Wildcat
1616 W. BENDER BLVD. HOBBS, NM 88240			VACUUM; GRAYBURG SA
4. Well Location	00 6 6 6 4 6		and the same of
			2380feet from theWESTline
Section 06 Township 18S Range 35E NMPM County LEA			
11. Elevation (Show whether DR, RKB, RT, GR, etc.)			
THE PARTY OF THE P			
12. Check Appro	priate Box to Indicate N	ature of Notice.	Report or Other Data
**			•
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR			
TEMPORARILY ABANDON			
PULL OR ALTER CASING   MUI	TIPLE COMPL	CASING/CEMEN	11 30B
CLOSED-LOOP SYSTEM			
OTHER: RETURN TO INJECT		OTHER:	
			d give pertinent dates, including estimated date
of starting any proposed work). Sproposed completion or recomple		C. For Multiple Co	mpletions: Attach wellbore diagram of
THE CVU 121 IS CURRENTLY TA'D WITH THE INJECTION EQUIPMENT IN THE HOLE. PER AGREEMENT WITH			
MAXEY BROWN CHEVRON IS CONNECTING THE FLOWLINE BACK TO THE INJECTION HEADER AND WELLHEAD, TESTING THE LINE, AND RETURNING THE WELL TO INJECTION.			
WELLHEAD, TESTING THE LINE, AND RETORNING THE WELL TO INJECTION.			
THE CASING WAS TESTED TO 570 PSI FOR 32 MINUTES ON 05/31/2016. THE CHART IS ATTACHED.			
Spud Date: Rig Release Date:			
I hereby certify that the information above	is true and complete to the be	est of my knowledg	ge and belief.
A · 11			
SIGNATURE Cindy Honer-Miriello TITLE PERMITTING SPECIALIST DATE 06/15/2016			
Type or print name <u>CINDY HERRERA-MURILLO</u> E-mail address: <u>Cherreramurillo@chevron.com</u> PHONE: <u>575-263-0431</u>			
For State Use Only			1 1
APPROVED BY: FOR RECOF	RD ONLY,TIE		DATE 6/21/2016
Conditions of Approval (if any):			

