

Submit 1 Copy To Appropriate District Office
District I - (575) 393-6161
1625 N. French Dr., Hobbs, NM 88240
District II - (575) 748-1283
811 S. First St., Artesia, NM 88210
District III - (505) 334-6178
1000 Rio Brazos Rd., Aztec, NM 87410
District IV - (505) 476-3460
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised July 18, 2013

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

WELL API NO. 30-025-31880
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B-155-6
7. Lease Name or Unit Agreement Name VACCUUM GLORIETA WEST UNIT
8. Well Number 105
9. OGRID Number 4323
10. Pool name or Wildcat VACUUM GLORIETA
4. Well Location Unit Letter N: 453 feet from the SOUTH line and 1340 feet from the WEST line Section 36 Township 17 S Range 34E NMPM County LEA
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3999 GR

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
DOWNHOLE COMMINGLE <input type="checkbox"/>	P AND A <input type="checkbox"/>
CLOSED-LOOP SYSTEM <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>
OTHER: <input type="checkbox"/>	OTHER: ANNUAL MIT TEST

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.

CHEVRON U.S.A. INC HAS CONDUCTED THE ANNUAL MIT TEST ON THE ABOVE WELL.
CHART ATTACHED.

PLEASE NOTE THIS TEST IS FOR UIC ANNUAL TESTING

Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE: Wong TITLE: REGULATORY ASSISTANT DATE: 5/14/19

Type or print name: Jessica Jones E-mail address: jjzi@chevron.com PHONE: 432-687-7575

For State Use Only

APPROVED BY: Rick Buckman TITLE: DIST 1 SUPERVISOR DATE: 5-16-19
Conditions of Approval (if any):

PRINTED IN U.S.A.

64 MIN

56 MIN

48 MIN

40 MIN

32 MIN

24 MIN

NIW 9

NIW 8

NIW 96

START

Graphic Controls LLC
(6.375 ARC LINE GRAD.)

DATE 4-3-2019
MOI P 0-1000-8-96MIN

