Submit One Copy To Appropriate District Office	State of New Mexico			Form C-103
<u>District I</u> 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources		Revised November 3, 2011 WELL API NO.	
<u>District II</u> 811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION		30-025-31786	
District III 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.		5. Indicate Typ STATE	pe of Lease FEE
District IV	Santa Fe, NM 87505		6. State Oil &	
1220 S. St. Francis Dr., Santa Fe, NM 87505				
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A				e or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)			VACUUM GLORIETA WEST UNIT 8. Well Number	
1. Type of Well: Oil Well Gas Well Other INJECTION			30	
2. Name of Operator CHEVRON USA Inc.			9. OGRID Nui 4323	mber
3. Address of Operator			10. Pool name	or Wildcat
6301 Deauville Blvd., Midland, TX 79706			VACUUM, GL	LORIETA
4. Well Location:				
Unit Letter_J: 2305_feet from the SOUTH line and 1391_feet from the EAST line				
Section 25 Township 17-S Range 34-E NMPM County LEA 11. Elevation (Show whether DR, RKB, RT, GR, etc.)				
	3990' GL	, 1012, 111, 011, 010.)		
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	CHANGE PLANS	COMMENCE DRI	_	P AND A
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT	I JOB	
OTHER:				spection after P&A
 □ All pits have been remediated in compliance with OCD rules and the terms of the Operator's pit permit and closure plan. □ Rat hole and cellar have been filled and leveled. Cathodic protection holes have been properly abandoned. 				
A steel marker at least 4" in diameter and at least 4' above ground level has been set in concrete. It shows the				
OPEDATOD NAME I FACE NAME WELL NUMBED ADINUMBED QUADTED/QUADTED LOCATION OF				
OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, QUARTER/QUARTER LOCATION OR UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATION HAS BEEN WELDED OR				
PERMANENTLY STAMPED ON THE MARKER'S SURFACE.				
The location has been leveled as nearly as possible to original ground contour and has been cleared of all junk, trash, flow lines and				
other production equipment.				
 ✓ Anchors, dead men, tie downs and risers have been cut off at least two feet below ground level. ✓ If this is a one-well lease or last remaining well on lease, the battery and pit location(s) have been remediated in compliance with 				
OCD rules and the terms of the Operator's pit permit and closure plan. All flow lines, production equipment and junk have been removed				
from lease and well location.				
All metal bolts and other materials have been removed. Portable bases have been removed. (Poured onsite concrete bases do not have to be removed.)				
All other environmental concerns have been addressed as per OCD rules.				
Pipelines and flow lines have been abandoned in accordance with 19.15.35.10 NMAC. All fluids have been removed from non-				
retrieved flow lines and pipelines. If this is a one-well lease or last remaining well on lease: all electrical service poles and lines have been removed from lease and well				
location, except for utility's distribution infrastructure.				
When all work has been completed, return this form to the appropriate District office to schedule an inspection.				
SIGNATURE <u>Katherine Papageorge</u> TITLE Decommissioning Project Manager DATE 10.16.20				
TYPE OR PRINT NAMEKatherine Papageorge_E-MAIL: _Katherine.Papageorge@chevron.com PHONE:832-854-5291				
For State Use Only				
ADDDOVED DV.	TITLE TITLE	11 000		DATE 40/20/22
APPROVED BY:	IIILE_C	ompliance Officer A	\	DATE_10/30/20