Submit I Copy To Appropriate District Office District I - (575) 393-6161 1625 N. French Dr., Hobbs, NM 8834035 OCD 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 District IV - (505) 476-3460 Santa Fe, NM 87505		Form C-103 Revised August 1, 2011	
		WELL API 30-025-258	NO. 15
		5. Indicate Type of Lease STATE FEE	
1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505		6. State Oil & Gas Lease No.	
87505 Prancis Dr., Santa Fe, NW			
SUNDRY NOTICES AND REPORTS ON WELLS (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		7. Lease Name or Unit Agreement Name CENTRAL VACUUM UNIT	
PROPOSALS.)		8. Well Number 27	
1. Type of Well: Oil Well Gas Well Other INJECTOR 2. Name of Operator		9. OGRID Number 4323	
CHEVRON U.S.A. INC			
3. Address of Operator		10. Pool name or Wildcat	
15 SMITH ROAD, MIDLAND, TEXAS 79705		VACUUM GRAYBURG SAN ANDRES	
4. Well Location			
Unit Letter J 1330 feet from the SOUTH line and 1425 feet from the EAST line Section 25 Township 17S Range 34E NMPM Coun			County LEA
Section 25 Township 17S Range 3			County LEA
		,	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO: SUB-		SEQUENT REPORT OF: K □ ALTERING CASING □	
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRI			_ _
PULL OR ALTER CASING			
DOWNHOLE COMMINGLE			
OTHER:	OTHER: SPEC	IAL ANNUAL	MIT W/CHART
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.			
09/17/2013: NOTIFIED NMOCD. RAN CHART. PRESS TO 2225# FOR 31 MINUTES. (WITNESSED BY MAXEY BROWN,			
NMOCD). ORIGINAL CHART & COPY OF CHART ATTACHED).			
	<u> </u>		
Spud Date: Rig Release I	Date:		
	L		
I hereby certify that the information above is true and complete to the	hast of my knowlada	a and haliaf	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
SIGNATURE ASKED IN FOR FOR TITLE: REGULATORY SPECIALIST DATE: 09/23/2013			
Type or print name: DENISE PINKERTON E-mail addre	ss: <u>leakejd@chevron</u>	<u> </u>	PHONE: 432-687-7375
APPROVED BY: Wall Whitah TITLE Compliance Officer DATE 09/27/2013			
Conditions of Approval (if any):	,		

SEP 3 0 2013

