Submit 1 Copy To Appropriate District Office	State of New Mexico		Form C-103	
District 1 – (575) 393-6161 Energy, Minerals and Natural Resources		l Resources	Revised August 1, 2011 WELL API NO.	
1625 N. French Dr., Hobbs, NM 8824010638 OCD  District II – (575) 748-1283			30-025-24361	
			5. Indicate Type of Lease	
District III – (505) 334-6178			STATE STATE STATE	
<u>District 1v</u> = (303) 476-3400			6. State Oil & Gas Lea	ise No.
1220 S. St. Francis Dr., Santa Fe, NM 87505 RECEIVED				
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or Uni	t 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.)			VACUUM GRAYBURG SAN ANDRES UNIT	
1. Type of Well: Oil Well ☐ Gas Well ☒ Other INJECTOR			8. Well Number 35	
2. Name of Operator CHEVRON U.S.A INC.			9. OGRID Number 4323	
3. Address of Operator		10. Pool name or Wildcat		
15 SMITH ROAD, MIDLAND, TEXAS 79705			VACUUM G/B SAN ANDRES	
4. Well Location				
Unit LetterG:2630	feet from theNOR	TH_ line and13	330feet from the	eEASTline
Section 1 Town	nship 18-S Range	34-E	NMPM Cor	unty LEA
11. Elevation (Show whether DR, RKB, RT, GR, etc.)				
3,988' (GL)				
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
NOTICE OF INTENTION	EQUENT REPOR	RT OF:		
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR				
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRI				VD A
PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMEN			<del>-</del> ,	_
DOWNHOLE COMMINGLE				
•				_
OTHER: PREP FOR CO2 INJ, CO & STIMULA	TE 🔲 🖂	OTHER:		
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.				
THIS WELL IS GOING TO BE PUT ON CO2 INJ. WILL BE RIGGED UP ON THE WELL TO CLEAN OUT THE WELL,				
RE-PERF FROM 4,264 – 4,740, ACIDIZE, REPLACE THE INJECTION EQUIPMENT, AND RTI.				
			•	
Spud Date:	Rig Release Date	e:		
	- <b></b>			
Therefore established the state of the state	1 1		3.1.12.0	
I hereby certify that the information above is true	e and complete to the best	t of my knowledge	and belief.	
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SIGNATURE MILES MARY FOR	TITLE	Vatory / ) sec	ialist date	10 21 2013
Type or print name ) RN152 PINIKEY-DAL E-mail address: (Lake ) da Chevrou Com PHONE: 432-687-7375				
For State Use Only	1 / ~	/		
APPROVED BY:	TITLE DE	STIMP	DATE	10-24-2013
Conditions of Approval (if any):	IIILL_	a. a. Cl	DATE	
			OCT O	10-24-2013 4 2013 <sup>1</sup>
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