Submit 1 Copy To Appropriate District State of New Mexico	F 0 102
Office Minamla and Natural Decourses	Form C-103 Revised July 18, 2013
1625 N. French Dr., Hobbs, NM 88240	WELL API NO. 30-025-02286
811 S. First St., Artesia, NM 88210 DFC ICE WONSERVATION DIVISION	5. Indicate Type of Lease
District III – (505) 334-6178 1220 South St. Francis Dr.	STATE FEE
District IV – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM RECEIVED Santa Fe, NM 87505	6. State Oil & Gas Lease No.
87505 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	WEST VACUUM UNIT
PROPOSALS.) 1. Type of Well: Oil Well Gas Well	8. Well Number 44
2. Name of Operator CHEVRON USA INC	9. OGRID Number 4323
3. Address of Operator 15 SMITH RD, MIDLAND, TX 79705	10 Pool name or Wildcat VACUUM GRAYBURG SA
4. Well Location	
Unit Letter <u>C</u> : <u>660</u> feet from the <u>NORTH</u> line and	1980 feet from the WEST line
	NMPM County LEA
11. Elevation (Show whether DR, RKB, RT, GR, et	
12. Check Appropriate Box to Indicate Nature of Notice	e. Report or Other Data
	•
NOTICE OF INTENTION TO: SU	
	RILLING OPNS. P AND A
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEME	
CLOSED-LOOP SYSTEM	
13. Describe proposed or completed operations. (Clearly state all pertinent details, a	and give pertinent dates, including estimated date
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple C	Completions: Attach wellbore diagram of
proposed completion or recompletion.	
ANNUAL MIT CHART	
ANNUAL MIT CHART	
Spud Date: Rig Release Date:	
I hereby certify that the information above is true and complete to the best of my knowle	dge and belief.
SIGNATURE Lindy Henre-Muielos TITLE PERMITTING SPECIA	ALISTDATE_12/12/2013
Type or print name <u>CINDY HERRERA-MURILLO</u> E-mail address: <u>Cherreramurill</u>	lo@chevron.com_ PHONE:575-263-0431
For State Use Only	
APPROVED BY: Accepted for Record Only	DATE
Conditions of Approval (if any): WAB 1/14/2014	JAN 16 2014
V	

INCVED DI.	
nditions of App	proval (if any):

JAN 16 2014 000 K

