| Submit 1 Copy To Appropriate District Office | State of New Me | | Form C-103 |
|---|---|--|--------------------------------------|
| <u>District I</u> - (575) 393-6161 | ict I – (575) 393-6161 N. French Dr., Hobbs, NM 88240 ict II – (575) 748-1283 S. First St., Artesia, NM 88210 ict III – (505) 334-6178 PRIO BRZOS Rd. Aztec, NM 87410 Energy, Minerals and Natural Resources OIL CONSERVATION DIVISION 1220 South St. Francis Dr. | | Revised August 1, 2011 WELL API NO. |
| District II – (575) 748-1283 | | | 30-025-25802 |
| 811 S. First St., Artesia, NM 88210 | | | 5. Indicate Type of Lease |
| 1000 Rio Brazos Rd., Aztec, NM 87410 | | | STATE FEE |
| <u>District IV</u> - (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM | Santa Fe, NM 87 | 305 | 6. State Oil & Gas Lease No. |
| 87505 | | | |
| 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 121 |
| Type of Well: Oil Well Name of Operator | | | 0. OCDID Number 4222 |
| CHEVRON U.S.A. INC | • | AUG 21 2014 | 9. OGRID Number 4323 |
| 3. Address of Operator | | | 10. Pool name or Wildcat |
| 15 SMITH ROAD, MIDLAND, 7 | ΓEXAS 79705 | - OFWED | VACUUM GRAYBURG SAN ANDRES |
| 4. Well Location | | RECEIVED | |
| Unit Letter N 400 feet from the SOUTH line and 2380 feet from the WEST line | | | |
| Section 6 T | ownship 18S Range 35E | ENM | IPM County LEA • |
| | 11. Elevation (Show whether DR, | RKB, RT, GR, etc. | |
| | | | |
| E-PERMITTING F P&A NR T INT TO P&A F CSNG C TA OTHER: 13. Describe proposed or come of starting any proposed we proposed completion or re 08/08/2014: NOTIFIED NMOCD. CHART ATTACHED). WELL IS TEMPORARILY ABAN Spud Date: | ork). SEE RULE 19.15.7.14 NMAC completion. RAN CHART. PRESS TO 540 PS This Appro | SUB REMEDIAL WOR COMMENCE DR CASING/CEMEN OTHER: EXTE Description of Tempor The Substitute of T | SSEQUENT REPORT OF: RK |
| SIGNATURE ASMIRE / | Morardon TITLE | : REGULATORY | SPECIALIST DATE: 08/20/2014 |
| Type or print name: DENISE PINKERTON E-mail address: <u>leakejd@chevron.com</u> PHONE: 432-687-7375 | | | |
| APPROVED BY: Maley Stown TITLE Dist Supervisor DATE 8/25/2014 | | | |
| Conditions of Approval (if any) | | | |

AUG 2 5 2014







