Submit I Copy To Appropriate District Office	State of New Mexico			Form C-103	
<u>District 1</u> - (575) 393-6161	OIL CONSERVATION DIVISION		Revised August 1, 2011		
1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283			WELL API NO. 30-025-31815 5. Indicate Type of Lease		
811 S. First St., Artesia, NM 88210					
<u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.		STATE 🛛 FEE 🗌		
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM	Santa Fe, NM 8	37505	6. State Oil	& Gas Lease No.	
87505.	ICEA AND DEPODER ON WELL	·			
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A			7. Lease Name or Unit Agreement Name VACUUM GLORIETA WEST UNIT		
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH			8. Well Number 42		
PROPOSALS.) 1. Type of Well: Oil Well	Gas Well Other INJECT	OR			
2. Name of Operator	HOBBS OCD			9. OGRID Number 4323	
CHEVRON U.S.A. INC					
3. Address of Operator 15 SMITH ROAD, MIDLAND, 7	TEXAS 79705 SE	P 2 4 2014		ume or Wildcat GLORIETA	
4. Well Location					
Unit Letter M 1114 fee	et from the SOUTH line and 41	RECEIMENE WEST	line		
Section 30 Township 17S Range 35E NMPM County LEA					
	11. Elevation (Show whether D	R, RKB, RT, GR, etc	.)		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON TEMPORARILY ABANDON CHANGE PLANS PULL OR ALTER CASING MULTIPLE COMPL DOWNHOLE COMMINGLE 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. THE SUBJECT WELL FAILED THE BRADENHEAD TEST AND A LETTER OF VIOLATION WAS ISSUED 08/19/2014. CHEVRON INTENDS TO REPAIR THE WELL AND RE-TEST. Spud Date: Rig Release Date: I hereby certify that the information above is true and complete to the best of my knowledge and belief.					
SIGNATURE ACUSED	AKGEM TITL	E: REGULATORY	SPECIALIST	5 DATE: 09/23/2014	
		an look to	n 00 <i>r</i> -	DUONE, 422 607 7276	
Type or print name: DENISE PINKERTON E-mail address: leakejd@chevron.com PHONE: 432-687-7375 For State Use Only Image: Comparison of the state					
APPROVED BY: <u>Self</u> Conditions of Approval (if any):	unamah TITLE S	tat Manag	- C	DATE 9/26/ 2014	
Conditions of Approval (It ally).					
FOR RECORD ONLY					

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