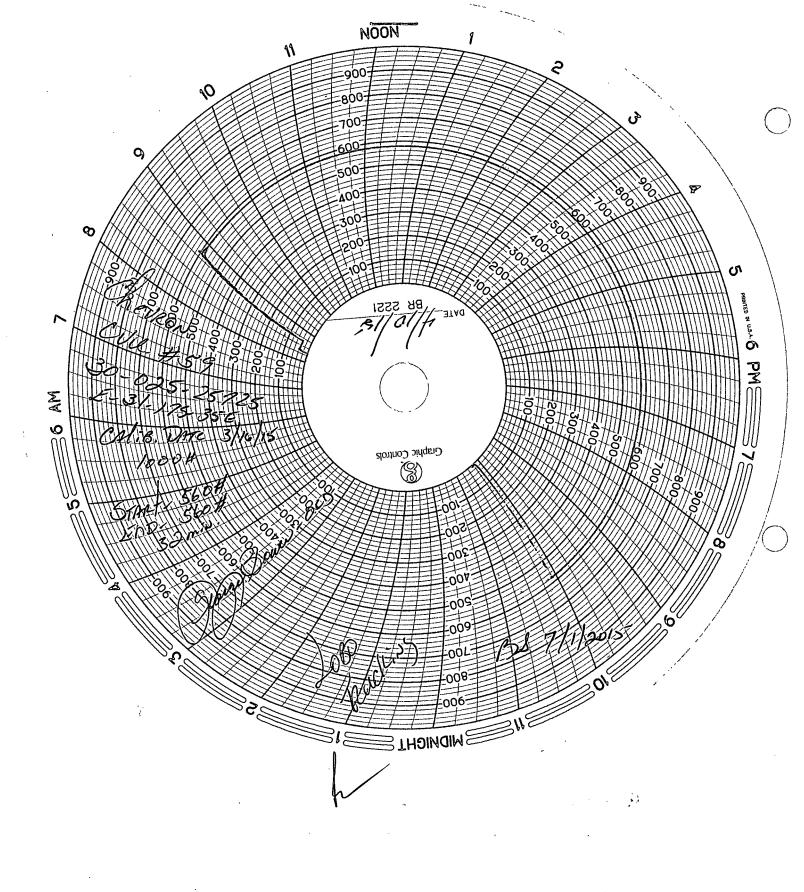
Submit 1 Copy To Appropriate District	State of New Mexico	• Form C-103
Office <u>District 1</u> - (575) 393-6161	Energy, Minerals and Natural Resources	Revised July 18, 2013
1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283	OIL CONŜERVATION DIVISION	WELL API NO. 3002525725
811 S. First St., Artesia, NM 88210 <u>District III</u> ~ (505) 334-6178	1220 South St. Francis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> - (505) 476-3460	Santa Fe, NM 87505	STATE FE77E
		6. State Oil & Gas Lease No. B 1501
	CES AND REPORTS ON WELLS LS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name
	N FOR PERMIT" (FORM C-101) FOR SUCH	8. Well Number
,	s Well X Other Injector	59 🖌
2. Name of Operator CHEVRON U.S.A.	HOBBS OCD	9. OGRID Number 4323
3. Address of Operator 15 SMITH ROAD MIDLAND, TX 79705	JUN 1 9 2015	10. Pool name or Wildcat VACUUM GRAYBURG SAN ANDRES
4. Well Location	DECEIVED	
	from the _N_ line and _1200 _feet from the _W_	
	vnship 17 S Range 35 E NM 11. Elevation (Show whether DR, RKB, RT, GR, et	,
	3977 GL	
12. Check	Appropriate Box to Indicate Nature of Notice, F	Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK 📃 PLUG AND ABANDON 🔲 REMEDIAL WORK 🗌 ALTERING CASING 🗌		
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB		
CLOSED-LOOP SYSTEM		
OTHER:	OTHER: ANNUA	AL MIT TEST
13. Describe proposed or comp	bleted operations. (Clearly state all pertinent d	etails, 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.		
CHEVRON U.S.A. INC HAS CONDUCTED THE ANNUAL MIT TEST ON THE ABOVE WELL.		
CHART ATTACHED. **PLEASE NOTE THIS TEST IS F	OR UIC ANNUAL TESTING**	
Spud Date:	Rig Release Date:	
I hereby certify that the information	above is true and complete to the best of my l	knowledge and belief.
Λ		
SIGNATURE: A. Ym	TITLE: REGULATORY ASSISTAN	DATE: <u>Ile June</u> 2015
Type or print name: Adriann Garcia	E-mail address: Adriann.Garcia@chevron.cc	PHONE: 432-687-7617
For State Use Only		
APPROVED BY: <u>Bell Source</u> Conditions of Approval (if any):	mak TITLE Staff Manager	
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