|   | Submit I Copy To Appropriate District  Office  State of New Mexico   | Form C-103  |
|---|--|---|
|   | District I – (575) 393-416 Energy, Minerals and Natural Resou 1625 N. French Dr., Hobbs, NM 88240  | Revised July 18, 2013   |
|   | 1625 N. French Dr., Hobbs, NM 88240  | WELL API NO.<br>30-025-24032  |
|   | District (1) (375) 748-1283<br>811 S. First St., Artesia, NAV88210 OIL CONSERVATION DIVISIO  | ON 50-023-24032<br>5. Indicate Type of Lease  |
|   | District III – (505) 3346178 1220 South St. Francis Dr.  | STATE STEE  |
|   | 1000 Rio Brazos Rd., Aztec, NM 1710<br>District IV – (505) 476 3460 Santa Fe, NM 87505   | 6. State Oil & Gas Lease No.  |
|   | District IV – (505) 476 3460 Santa Fe, NM 87505  1220 S. St. Francis Dr. Santa Fe, NM  87505   |   |
|   | 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  |   |
|   | DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH  | NORTH VACUUM ABO WEST UNIT  |
| / | PROPOSALS.)  1. Type of Well: Oil Well Gas Well Other INJECTION  | 8. Well Number #12  |
|   | 2. Name of Operator  | 9. OGRID Number   |
| / | CHEVRON USA INC  | 4323  |
|   | 3. Address of Operator   | 10. Pool name or Wildcat  |
|   | 1616 W. BENDER BLVD HOBBS, NM 88240  | VACUUM ABO NORTH  |
|   | 4. Well Location   |   |
|   | Unit Letter N: 660 feet from the SOUTH line and 13   |   |
|   | Section 22 Township 17S Range 34E  | NMPM County LEA   |
|   | 11. Elevation (Show whether DR, RKB, RT,   | GR, etc.)   |
|   |  |   |
|   | 12 Charle Ammanuista Day to Indicate Nature of   | Nation Report on Other Data   |
|   | 12. Check Appropriate Box to Indicate Nature of I  | Notice, Report of Other Data  |
|   | NOTICE OF INTENTION TO:  | SUBSEQUENT REPORT OF:   |
|   | PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIA   | AL WORK ALTERING CASING   |
|   | TEMPORARILY ABANDON ☐ CHANGE PLANS ☐ COMMEI  | NCE DRILLING OPNS. ☐ P AND A ☐  |
|   | PULL OR ALTER CASING   MULTIPLE COMPL   CASING/  | CEMENT JOB  |
|   |  |   |
|   | DOWNHOLE COMMINGLE   |   |
|   | CLOSED-LOOP SYSTEM   |   |
|   | CLOSED-LOOP SYSTEM ☐ OTHER: EXTEND TA – 3 YEAR ☐ OTHER:  |   |
|   | CLOSED-LOOP SYSTEM  OTHER: EXTEND TA – 3 YEAR OTHER:  13. Describe proposed or completed operations. (Clearly state all pertinent described by the complete of |   |
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