4	Submit 1 Copy To Appropriate District Office State of New Mexico				C-103	
	District_I - (575) 393-6161 1625 N. French Dr., Hobbs, NN 88340 DBS OCD nergy, Minerals and Natural Reso District_II - (575) 748-1283	urces	Revised July 18, 2013 WELL API NO.			
	In In Brazos Rd, Aztec, NM 8740R 06 2017 Rio Brazos Rd, Aztec, NM 8740R 06 2017		3002537233		_	
			5. Indicate Type of I		_	
	1220 S. S. Francis Dr. Santa Fa. NM 87505		6. State Oil & Gas I	FEE FEE		
	RECEIVED		o. State on a sub couse no.			
Γ	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 PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other TIND 2. Name of Operator CHEVRON U.S.A. 3. Address of Operator		7. Lease Name or Unit Agreement Name			
			CENTRAL VACUUM UNIT 8. Well Number			
			260			
-			9. OGRID Number			
			4323			
1			10. Pool name or Wildcat			
-	6301 DEAUVILLE BLVD MIDLAND, TX 79706		VACUUM GRAYBURG	SAN ANDRES		
4. Well Location						
Unit Letter_C_:_1235_feet from the _N_ line and _2446_ feet from the _W_ line Section 31 Township 17S Range 35E NMPM County LEA						
	Section 31 Township 17S Range 11. Elevation <i>(Show whether DR, RKB, RT,</i>		County LEA			
	12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data					
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:						
	TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PAND A COMMENCE ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB					
	DOWNHOLE COMMINGLE					
	CLOSED-LOOP SYSTEM					
	THER: OTHER: ANNUAL MIT TEST					
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 or recompletion. CHEVRON U.S.A. INC HAS CONDUCTED THE ANNUAL MIT TEST ON THE ABOVE WELL. CHART ATTACHED. **PLEASE NOTE THIS TEST IS FOR UIC ANNUAL TESTING**						
5	pud Date:					
]		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.						
	Thereby certify that the information above is true and complete to the best of my knowledge and belief.					
SIGNATURE: APRIL 2017 TITLE: REGULATORY ASSISTANT DATE:April 3, 2017						
Type or print name: Adriann Garcia E-mail address: Adriann.Garcia@chevron.com PHONE: 432-687-7617						
E	For State Use Only					
A (APPROVED BY: 2000 TITLE Compliance Officer DATE 4/18/17 Conditions of Approval (if any):					

