Submit 1 Copy To Appropriate District Office State of New Mexico Form C-103 Submit 1 Copy to Appropriate District C <u>District I</u> − (575) 393-6161 162€ N. French Dr., Hobbs, NM 88240 <u>District II</u> − (575) 748-1283 811 S. First St., Artesia, NM 88210 Energy, Minerals and Natural Resources Revised July 18, 2013 WELL API NO. OIL CONSERVATION DIVISION 3002531816 District III - (505) 334-6178 1220 South St. Francis D 1000 Rio Brazos Rd., Aztec, NM 87410 District IV - (505) 476-3460 Santa Fe, NM 87505 1220 S. St. Francis Dr., Santa Fe, NM 87505 SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OF PLUG BACK 5. Indicate Type of Lease STATE 🛛 FEE 6. State Oil & Gas Lease No. 7. Lease Name or Unit Agreement Name VACUUM GLORIETA WEST UNIT TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 8. Well Number 54 1. Type of Well: Oil Well Gas Well ☐ Other ☒ INJ 2. Name of Operator 9. OGRID Number CHEVRON U.S.A. 4323 3. Address of Operator 10. Pool name or Wildcat 6301 DEAUVILLE BLVD MIDLAND, TX 79706 VACUUM GLORIETA 4. . Well Location Unit Letter B: 51 feet from the NORTH line and 1588 feet from the EAST line 17 S Section Township Range 34E **NMPM** County LEA 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING CHANGE PLANS COMMENCE DRILLING OPNS. TEMPORARILY ABANDON PANDA PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB DOWNHOLE COMMINGLE **CLOSED-LOOP SYSTEM** OTHER: 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** Spud Date: Rig Release Date: I hereby certify that the information above is true and complete to the best of my knowledge and belief. Jon8 SIGNATURE: TITLE: REGULATORY ASSISTANT Type or print name: Jessica Jones E-mail address: jjzi@chevron.com PHONE: 432-687-7575 For State Use Only TITLE Compliance Ofice Supe

APPROVED BY

Conditions of Approval (if any):

