Submit 1 Copy To Appropriate District Office District I – (575) 393-6161 State of New Mexico Form C-103 Energy, Minerals and Natural Resources Revised July 18, 2013 1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> - (575) 748-1283 811 S. First St., Artesia, NM 88210 WELL API NO. OIL CONSERVATION DIVISION District III - (505) 334-6178 3002532806 1000 Rio Brazos Rd., Aztec, NM 87410 District IV – (505) 476-3460 1220 South St. Francis Dr. SUNDRY NOTICES AND REPORTS ON WELLSMAY
ORM FOR PROPOSALS TO DRILL OR TO DEEPEN
ERVOIR. USE "APPLICATION FOR PER" 1220 S. St. Francis Dr., Santa Fe, NM 87505 5. Indicate Type of Lease STATE 🛛 FEE 6. State Oil & Gas Lease No. 7. Lease Name or Unit Agreement Name (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PC CENTRAL VACUUM UNIT TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM: 401) FOR SUCH PROPOSALS.) 8. Well Number 201 1. Type of Well: Oil Well 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 GRAYSBURG SA 4. . Well Location *Unit Letter G: 1360 feet from the NORTH line and 1973 feet from the EAST_line Section Township 18 S Range 35E **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. SIGNATURE: TITLE: REGULATORY ASSISTANT Type or print name: Jessica Jones E-mail address: jjzi@chevron.com PHONE: 432-687-7575 TITLE Compliance Officer DATE 5/18/13 For State Use Only

APPROVED BY:

Conditions of Approval of any):

