ubmit 1 Copy To Appropriate District Office Form C-103 State of New Mexico <u> District I</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 Energy, Minerals and Natural Resources Revised July 18, 2013 87505 HOBBS OC 5. Indicate T District II - (575) 748-1283 811 S. First St., Artesia, NM 88210 OIL CONSERVATION DIVISION District III - (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410 1220 South St. Francis Dr. 5. Indicate Type of Lease District IV - (505) 476-3460 Santa Fe, NM 87505 1220 S. St. Francis Dr., Santa Fe, NM 87505 STATE 🛛 FEE 6. State Oil & Gas Lease No. Lease Name or Unit Agreement Name SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG ACUUM GLORIETA WEST UNIT TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C SUCH PROPOSALS.) 8. Well Number 27 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 6801 DEAUVILLE BLVD MIDLAND, TX 79706 VACUUM; GLORIETA 4. . Well Location Unit Letter I: 2359 feet from the SOUTH line and 64 feet from the EAST line Section 26 Township 17S 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: REMEDIAL WORK PERFORM REMEDIAL WORK PLUG AND ABANDON ALTERING CASING | **TEMPORARILY ABANDON CHANGE PLANS** COMMENCE DRILLING OPNS. P AND A 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:	
hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNATURE:	TITLE: REGULATORY ASSISTANT	DATE : 6/19/2018

Type or print name: Jessica Jones E-mail address: jjzi@chevron.com PHONE: 432-687-7575

APPROVED Conditions of

For State Use Only

Thican DATE 6/22/17

