Submit 1 Copy To Appropriate District Office District I – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88200 District II – (575) 748-1283 811 S. First St., Artesia, NM 88210 District III – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410 District IV – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505 FECEIV Santa Fe, NM 87505 FECEIV Santa Fe, NM 87505 FECEIV Santa Fe, NM 87505 FECEIV Santa Fe, NM 87505	
District II - (575) 748-1283 30-025-35686 811 S. First St., Artesia, NM 88210 1220 South St. Francis Dr. District III - (505) 334-6178 1220 South St. Francis Dr. 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 District IV - (505) 476-3460 ECEN Santa Fe, NM 87505	
bistrict III - (505) 334-6178 1220 South St. Francis Dr. 1000 Rio Brazos Rd., Aztec, NM 87410 1220 South St. Francis Dr. District IV - (505) 476-3460 5. Indicate Type of Lease 1220 S St. Francis Dr. 5. Indicate Type of Lease 1220 S St. Francis Dr. 5. State Oil & Gas Lease No.	
1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr. Santa Fe, NM 87505 6. State Oil & Gas Lease No.	
District y = (30) 470-3400 12200 St Francis Dr. Santa Fa NM SECEN Contract of the Contract of	
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 A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 8. Well Number:	nit כ
1. Type of Well: Oil Well Gas Well Other: Injection Well 26	
2. Name of Operator: 9. OGRID Number: Chevron U.S.A. Inc. 4323	
3. Address of Operator: 10. Pool name or Wildcat: 6301 Deauville Blvd, Midland, TX. 79706 Vacuum Grayburg San Andres	
4. Well Location	
Unit Letter <u>E : 2590</u> feet from the <u>North</u> line and <u>1270</u> feet from the <u>West</u> line	
Section 1 Township 18-S Range 34-E NMPM County Lea	
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	
3992' KB	
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	
TEMPORARILY ABANDON 🔲 CHANGE PLANS 📃 COMMENCE DRILLING OPNS. 🛄 P AND A	
PULL OR ALTER CASING DIMULTIPLE COMPL CASING/CEMENT JOB	
OTHER: Intent to repair leak and re-test MIT.	
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated of	late
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of	
proposed completion or recompletion.	
The subject well recently failed its 5-year MIT so the plan is to perform a workover to repair the well and return to	
injection per the following procedure:	
1. MIRU, NDWH, NU BOPE	
2. POOH with all Injection equipment	
3. Repair leak. Condition of Approval: notify 4. Re-run injection equipment.	
 Re-run injection equipment. Notify NMOCD to witness pressure test of casing and chart OCD Hobbs office 24 hours 	
6. File subsequent report with MIT chart to NMOCD prior of running MIT Test & Chart	
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	
Type or print nameJerry D. PooleE-mail address:jerrypoole@chevron.comPHONE:(432) 687-7295	
APPROVED BY: Maluus Brown Fittle AQ/I DATE 8/29/2018)
Conditions of Approval (if any):	

