Submit 1 Copy To Appropriate District Office District 1 - (575) 393-6161	State of New Mexico Form C-				
1625 N. French Dr., Hobbs, NM 88240 District II - (575) 748-1283	Energy, Minerals and Natural Resources			Revised July 18, 2013	
811 S. First St., Artesia, NM 88210 District III - (505) 334-6178	OIL CONSERVATION DIV		WELL API NO. 30-025-24330		
1000 Rio Brazos Rd., Aztec, NM 87410 District IV - (505) 476-3460	1220 South St. France Dr.		5. Indicate Type of Lease		
1220 S. St. Francis Dr., Santa Fe, NM 87505	Santa Fe, NM 8 905		STATE 🛛 FEE 🗌		
	SUNDRY NOTICES AND REPORTS OF WELLS			6. State Oil & Gas Lease No.	
SUNDRY NOTICES AND REPORTS OF WELLS			7. Lease Name or Unit Agreement Name		
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DREPEN OR RUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM (CADI) FOR			VGSA		
TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM (F01) FOR SUCH PROPOSALS.)					
1. Type of Well: Oil Well Gas Well Other INJ			8. Well Nun 32	nder	
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; GRAYBURG SAN ANDRES		
4. Well Location					
Unit Letter L: 2630 feet from the SOUTH line and 30 feet from the WEST line Section 1 Township 18 S Range 34E NMPM County LEA					
	. Elevation (Show whether DR, I				
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					
PULL OR ALTER CASING D MULTIPLE COMPL CASING/CEMENT JOB					
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:				
				L	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.					
SIGNATURE: JUNX TITLE: REGULATORY ASSISTANT DATE: 51419					
Type or print name: Jessica Jones E-mail address: jjzi@chevron.com PHONE: 432-687-7575					
For State Use Only					
Stylinking Distriction English					
APPROVED BY: Kick Kickman TITLE DIST I Sola DATE 5-16-19 Conditions of Approval (if any):					

