Submit 1 Copy To Appropriate District Office State of New Mexico District I - (575) 393-6161 State of New Mexico	Form C-103
1625 N. French Dr., Hobbs, NM 8824 HOBBS OCD Minerals and Natural Resource District II - (575) 748-1283	es Revised July 18, 2013 WELL API NO.
District III - (505) 334-6178 OIL CONSERVATION DIVISION	30-025-25793
1000 Rio Brazos Rd., Azlec, NM 87410 AUG 1 2 2019 1220 S. St. Francis Dr., Santa Fe, NM 87505 1220 S. St. Francis Dr., Santa Fe, NM 87505	5. Indicate Type of Lease STATE ☑ FEE ☐
RECEIVED	6. State Oil & Gas Lease No.
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 TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) SUCH PROPOSALS.)	FOR SETTING WITH STATE
1. Type of Well: Oil Well Gas Well Other INJ	8. Well Number 16
Name of Operator CHEVRON U.S.A.	9. OGRID Number 4323
Address of Operator 6301 DEAUVILLE BLVD MIDLAND, TX 79706	10. Pool name or Wildcat VACUUM GRAYSBURG SA
Well Location Unit Letter G: 2630 feet from the NORTH line and 1330 feet from the EAST line Section 30 Township 17 S Range 35E NMPM County LEA	
11. Elevation (Show whether DR, RKB, RT, G 3980' GL	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PAND A PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB CLOSED-LOOP SYSTEM 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: JUICA JUPA TITLE: REGULATORY ASSISTANT DATE: 8 10 19	
Type or print name: Jessica Jones E-mail address: jjzi@chevron.com PHONE: 432-687-7575	
APPROVED BY: Say Holenson TITLE ompleance of Special DATE 8-29-19 Conditions of Approval (If any):	

