

Submit 1 Copy To Appropriate District Office
District I - (575) 393-6161
1625 N. French Dr., Hobbs, NM 88240
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

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised July 18, 2013

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-025-31701
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name VACUUM GLORIETA WEST UNIT
8. Well Number #40
9. OGRID Number 4323
10. Pool name or Wildcat VACUUM; GLORIETA
11. Elevation (Show whether DR, RKB, RT, GR, etc.)

SUNDRY NOTICES AND REPORTS ON WELLS (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.)	
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	HOBBS OGD
2. Name of Operator CHEVRON USA INC	APR 03 2020
3. Address of Operator 1616 W. BENDER BLVD HOBBS, NM 88240	RECEIVED
4. Well Location Unit Letter <u>K</u> : <u>1590</u> feet from the <u>SOUTH</u> line and <u>2404</u> feet from the <u>WEST</u> line Section <u>25</u> Township <u>17S</u> Range <u>34E</u> NMPM County <u>LEA</u>	
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 <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: TA STATUS W/CHART <input checked="" type="checkbox"/>	

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.

03/31-2020 TEST CASING TO 550 PSI FOR 32 MINUTES. NMOCD NOT ABLE TO WITNESS MIT TEST.
MIT CHART AND BRADENHEAD TEST ATTACHED

FINAL TA STATUS- EXTENSION

CURRENT TA EXPIRES ON 04/04/2020

Approval of TA EXPIRES: 9/30/20
Well needs to be PLUGGED OR RETURNED
to PRODUCTION
BY THE DATE STATED ABOVE: 27

Spud Date:

Rig Release

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Cindy Herrera-Murillo TITLE PERMITTING SPECIALIST DATE 04/01/2020

Type or print name CINDY HERRERA-MURILLO E-mail address: Cherreramurillo@chevron.com PHONE: 575-263-0431

For State Use Only

APPROVED BY: Kerry Tate TITLE CO DATE 4-7-20

Conditions of Approval (if any):

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03/31-2020 TEST CASING TO 550 PSI FOR 32 MINUTES. NMOCD NOT ABLE TO WITNESS MIT TEST.
MIT CHART AND BRADENHEAD TEST ATTACHED

CURRENT TA EXPIRES ON 04/04/2020

Condition of Approval: notify
OCD Hobbs office 24 hours
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

Cindy Herrera-Murillo

TITLE

PERMITTING SPECIALIST

DATE 04/01/2020

Type or print name CINDY HERRERA-MURILLO

E-mail address: Cherreramurillo@chevron.com

PHONE: 575-263-0431

For State Use Only

APPROVED BY:

Kerry Fata

TITLE

CO

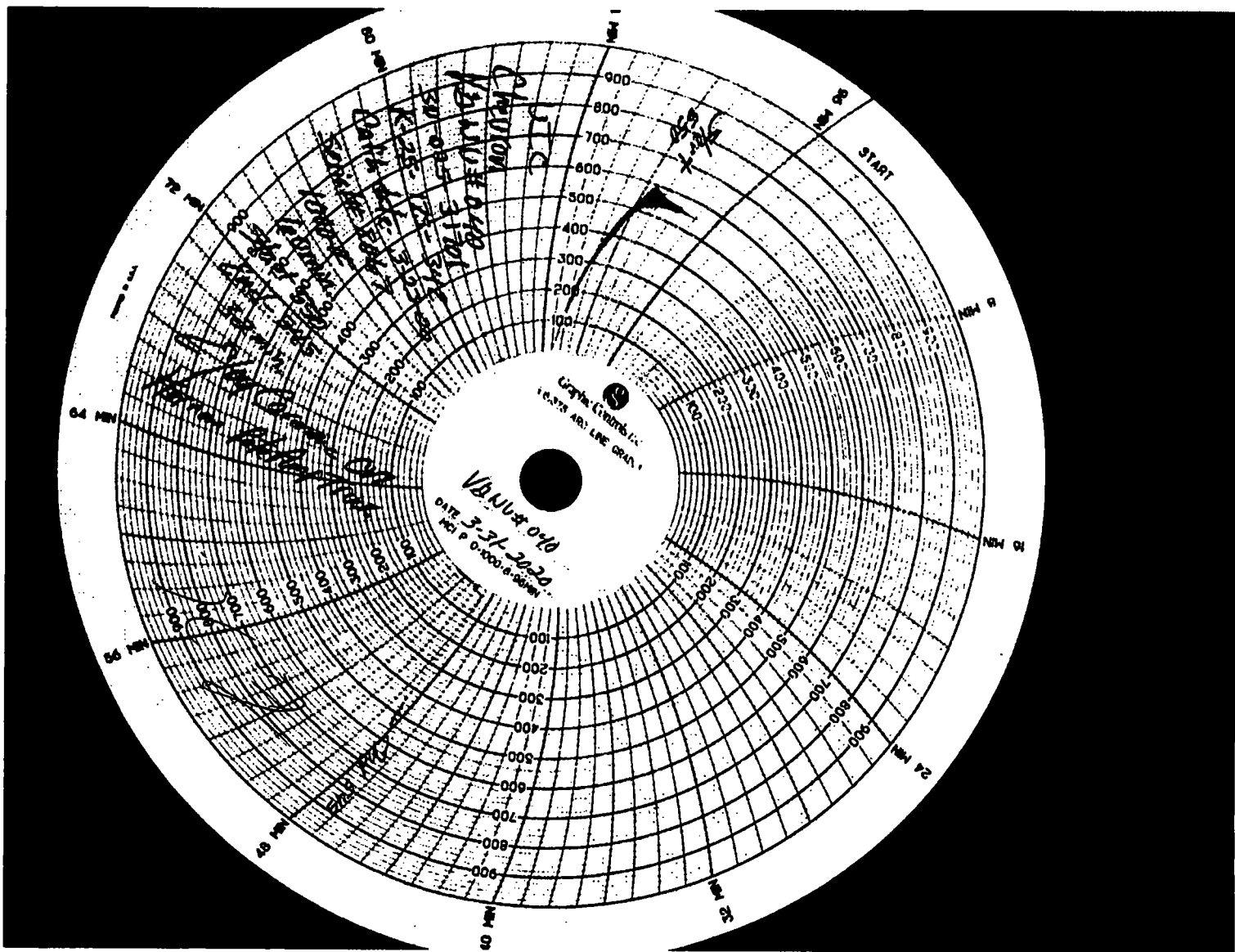
A

DATE

4-3-20

Conditions of Approval (if any):

Final
extension



District I
1625 N French Dr., Hobbs, NM 88240
Phone (575) 393-6161 Fax (575) 393-0720

State of New Mexico
Energy, Minerals and Natural Resources Department
Oil Conservation Division Hobbs District Office

BRADENHEAD TEST REPORT

Operator Name <i>Chevron USA INC.</i>		API Number <i>30-025-31701</i>
Property Name <i>Vacuum & Lorient West Unit</i>		Well No. <i># 040</i>

1. Surface Location

UL - Lot <i>K</i>	Section <i>25</i>	Township <i>17S</i>	Range <i>34E</i>	Feet from <i>1590</i>	NS Line <i>F5L</i>	Feet From <i>2404</i>	E/W Line <i>FWL</i>	County <i>Lea</i>
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Well Status

TA'D Well <input checked="" type="radio"/> YES <input type="radio"/> NO	SHUT-IN <input checked="" type="radio"/> YES <input type="radio"/> NO	INJECTOR <input type="radio"/> INJ <input type="radio"/> SWD	PRODUCER <input type="radio"/> OIL <input type="radio"/> GAS	DATE <i>3-31-20</i>
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OBSERVED DATA

	(A)Surf Intern	(B)Intern(1)	(C)Intern(2)	(D)Prod Case	(E)Tubing
Pressure	<i>0</i>			<i>0</i>	
Flow Characteristics					
Puff	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	CO2 _____
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	WTR _____
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	GAS _____
Down to nothing	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	If applicable type
Gas or Oil	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	fluid injected for
Water	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	Waterflood

Remarks: Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

TA - Extension
MIT - Passed

Signature: <i>Eley Carmona</i>	OIL CONSERVATION DIVISION
Printed name: <i>Eley Carmona</i>	Entered into RBDMS
Title: <i>ESPS</i>	Re-test
E-mail Address: <i>ECarmona@Chevron.com</i>	
Date: <i>3-31-2020</i>	Phone: <i>575-200-6265</i>
Witness:	