

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. 30-025-25816
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 CENTRAL VACUUM UNIT
8. Well Number 28
9. OGRID Number 4323
10. Pool name or Wildcat VACUUM GRAYBURG SAN ANDRES

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 ☐ Gas Well ☐ Other INJECTOR

2. Name of Operator
CHEVRON USA INC

3. Address of Operator
6301 DEAUVILLE BLVD, MIDLAND, TEXAS 79706

4. Well Location

Unit Letter P : 1230 feet from the SOUTH line and 39 feet from the EAST line
Section 25 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:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
DOWNHOLE COMMINGLE ☐
CLOSED-LOOP SYSTEM ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐
OTHER: Repair with MIT Chart ☒

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 USA INC HAS REPAIRED THE ABOVE WELL. THIS WELL HAS FAILED A MIT TEST. THE PACKER WAS REPLACED AND WELLBORE IS READY TO RESTART INJECTION.

03/10/2020 TEST CASING TO 580 PSI FOR 32 MINUTES. TEST GOOD. WITNESSED BY GARY ROBINSON/NMOCD
PLEASE FIND ATTACHED MIT CHART AND A COPY OF BRADENHEAD TEST.

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 05/06/2020

Type or print name Cindy Herrera-Murillo E-mail address: eeof@chevron.com PHONE: 575-263-0431
For State Use Only

APPROVED BY: Kerry Tate TITLE CO A DATE 5-8-20
Conditions of Approval (if any)

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

HOBBS OOD

MAY 07 2020

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BRADENHEAD TEST REPORT

Operator Name Chevron USA Inc.	API Number 30-025-25814
Property Name CENTRAL VACUUM UNIT	Well No. #028

7. Surface Location

UL - Lot P	Section 25	Township 17S	Range 34E	Feet from 1230	N/S Line FSL	Feet From 159	E/W Line FEL	County LEA
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Well Status

TA'D Well YES <input type="radio"/> NO <input checked="" type="radio"/>	SHUT-IN YES <input type="radio"/> NO <input checked="" type="radio"/>	INJECTOR <input checked="" type="radio"/> INJ <input type="radio"/> SWD	PRODUCER OIL <input type="radio"/> GAS <input type="radio"/>	DATE 3-10-20
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
OBSERVED DATA

	(A)Surf-Interm	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	0	0		125	1700
Flow Characteristics					
Pull	Y/N <input checked="" type="radio"/>	Y/N <input checked="" type="radio"/>	Y/N <input checked="" type="radio"/>	Y/N <input checked="" type="radio"/>	CO2 _____
Steady Flow	Y/N <input checked="" type="radio"/>	Y/N <input checked="" type="radio"/>	Y/N <input checked="" type="radio"/>	Y/N <input checked="" type="radio"/>	WTR _____
Surges	Y/N <input checked="" type="radio"/>	Y/N <input checked="" type="radio"/>	Y/N <input checked="" type="radio"/>	Y/N <input checked="" type="radio"/>	GAS _____
Down to nothing	Y/N <input checked="" type="radio"/>	Y/N <input checked="" type="radio"/>	Y/N <input checked="" type="radio"/>	Y/N <input checked="" type="radio"/>	If applicable type
Gas or Oil	Y/N <input checked="" type="radio"/>	Y/N <input checked="" type="radio"/>	Y/N <input checked="" type="radio"/>	Y/N <input checked="" type="radio"/>	fluid injected for
Water	Y/N <input checked="" type="radio"/>	Y/N <input checked="" type="radio"/>	Y/N <input checked="" type="radio"/>	Y/N <input checked="" type="radio"/>	Waterflood

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

MIT-

Prod. csg. blew to zero into truck w/ slight fluid
in 4 min. dr

Signature: 	OIL CONSERVATION DIVISION
Printed name: E. Carmona	Entered into RBDMS 
Title: SEPS	Re-test
E-mail Address: Ecarmona@chevron.com	
Date: 3-10-2020	Phone: 575-200-76265
Witness: Shay Robinson	

MAY 07 2020

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