

District I
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Phone:(505) 393-6161 Fax:(505) 393-0720
District II
811 S. First St., Artesia, NM 88210
Phone:(505) 748-1283 Fax:(505) 748-9720
District III
1000 Rio Brazos Rd., Aztec, NM 87410
Phone:(505) 334-6178 Fax:(505) 334-6170
District IV
1220 S. St Francis Dr., Santa Fe, NM 87505
Phone:(505) 476-3470 Fax:(505) 476-3462

State of New Mexico
Energy, Minerals and Natural
Resources
Oil Conservation Division
1220 S. St Francis Dr.
Santa Fe, NM 87505

Form C-103
August 1, 2011

Permit 167408

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.)		WELL API NUMBER 30-025-40462
1. Type of Well: O		5. Indicate Type of Lease S
2. Name of Operator CHEVRON U S A INC		6. State Oil & Gas Lease No.
3. Address of Operator Attn: Sandy Stedman-Daniel, P.O. Box 2100, Houston, TX 77252		7. Lease Name or Unit Agreement Name CENTRAL VACUUM UNIT
4. Well Location Unit Letter <u>A</u> : <u>704</u> feet from the <u>N</u> line and <u>311</u> feet from the <u>E</u> line Section <u>36</u> Township <u>17S</u> Range <u>34E</u> NMPM Lea County		8. Well Number 251
11. Elevation (Show whether DR, KB, BT, GR, etc.) 3993 GR		9. OGRID Number 4323
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> Pit Type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____ Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____		10. Pool name or Wildcat

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE OF PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> Other: _____	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTER CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> Other: Drilling/Cement <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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.
1-10:DRILL 111-1522'.1-11:RAN 33 JTS OF 11 3/4",42#H-40,STC SURF CSG SET @ 1355. WASH 5 JTS FR 135-1522.SET CSG SHOE @ 1512.CMT W/1300 SX,1.72Y,13.6PPG LEAD CMT. 170 BBLs CMT TO SURF.1-13:DRILL 1522-1532,2400,2940,3215.1-14:RUN 8 5/8",32#,J-55,LTC CSG TO 1867,1-15:RUN 8 5/8" CSG FR 1867-3215.LAND CSG @ 3205. CMT W/300 SX,1.97Y,12.8PPG LEAD & 450 SX,1.51Y,14.2PPG TAIL.60 BBLs CMT TO SURF.1-16/1-19:DRILL 3215-3225.DRILL 3225-5123.1-20:LOG W/QUAD COMBO,NMR.RUN 5 1/2",17#,J-55,LTC,CSG TO 5086.CMT W/800 SX,13.5PPG,1.26Y LEAD,&350SX TAIL EVERCRETE,16PPG,1.12Y.84 BBLs CMT BACK TO SURF.1-22:REL RIG.

Casing and Cement Program															
Date	String	Fluid Type	Hole Size	Csg Size	Weight lb/ft	Grade	Est TOC	Dpth Set	Sacks	Yield	Class	1" Dpth	Pres Held	Pres Drop	Open Hole
	Surf		14.75	11.75	42		0	1512	1300						
	Int1		11	8.625	32		0	3215	750						
	Prod		7.875	5.5	17		0	5086	1150						

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOC guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Electronically Signed TITLE Regulatory Specialist DATE 5/17/2013
Type or print name Denise Pinkerton E-mail address leakejd@chevron.com Telephone No. 432-687-7375

For State Use Only:
APPROVED BY: Paul Kautz TITLE Geologist DATE 5/17/2013 1:53:11 PM