

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. 30-025-24328
5. Indicate Type of Lease STATE ☒ FEE ☐
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name VACUUM GRAYBURG SAN ANDRES
8. Well Number 15
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 BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well: Oil Well ☐ Gas Well ☐ Other	
2. Name of Operator CHEVRON U.S.A. INC.	
3. Address of Operator 15 SMITH ROAD, MIDLAND, TEXAS 79705	
4. Well Location Unit Letter: J 1400 feet from SOUTH line and 2450 feet from the EAST line Section 2 Township 18S 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

E-PERMITTING P&A NR _____ P&A R _____ INT TO P&A _____ CSNG _____ CHG Loc _____ TA _____ RBDMS CHART <i>AS</i> OTHER: _____	SUBSEQUENT REPORT OF: REMEDIAL WORK ☐ ALTERING CASING ☐ COMMENCE DRILLING OPNS. ☐ P AND A ☐ CASING/CEMENT JOB ☐ OTHER: WELLHEAD REPLACEMENT W/CHART
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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.

08/08/2014: NOTIFIED NMOCD. PRESS TO 560 PSI FOR 30 MINUTES. (ORIGINAL CHART & COPY OF CHART ATTACHED).

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

Denise Pinkerton

TITLE REGULATORY SPECIALIST

DATE 08/21/2014

Type or print name DENISE PINKERTON

E-mail address: leakejd@chevron.com

PHONE: 432-687-7375

For State Use Only

APPROVED BY:

Mary Brown

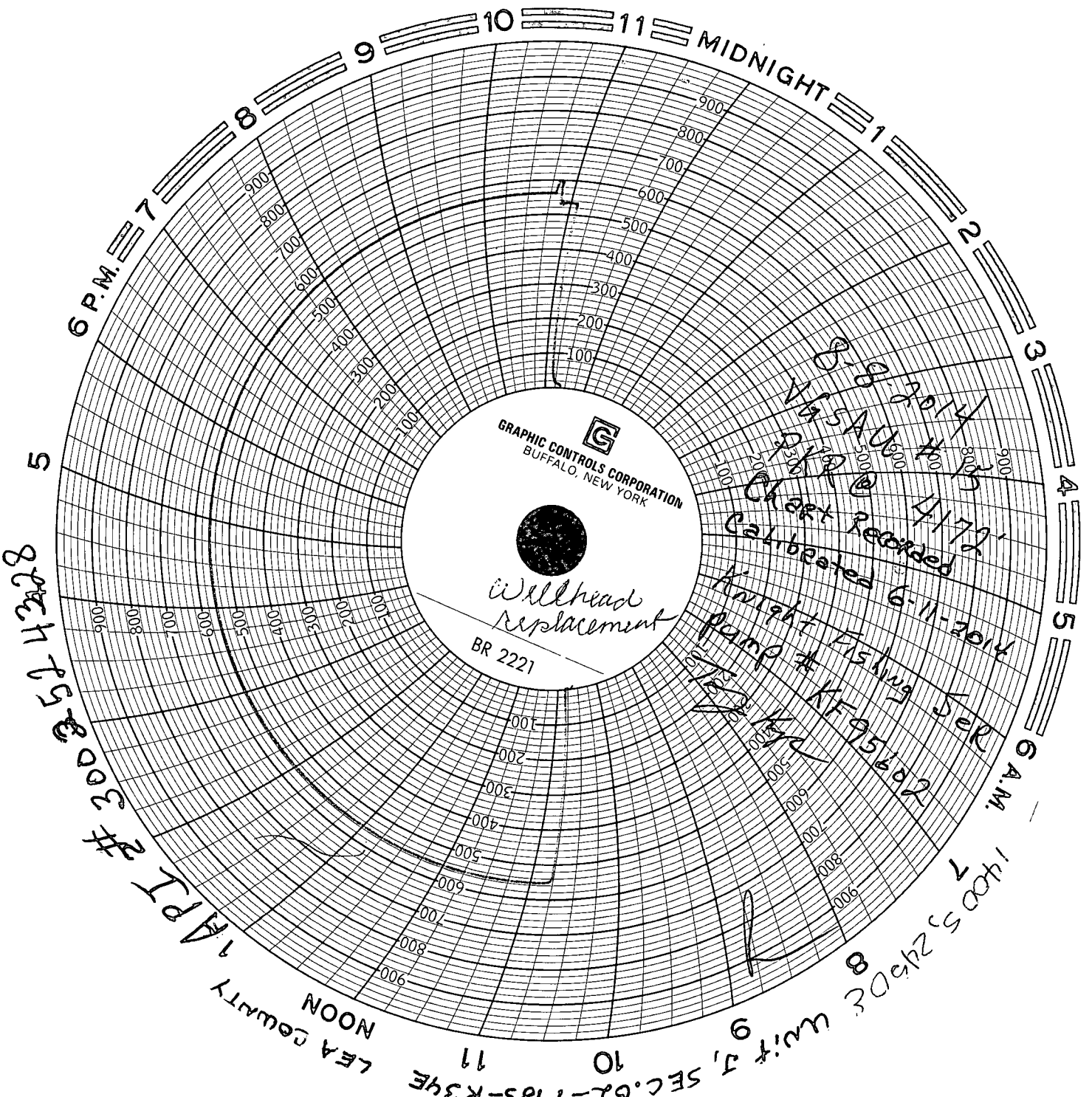
TITLE Dist. Supervisor

DATE 8/25/2014

Conditions of Approval (if any):

AUG 25 2014

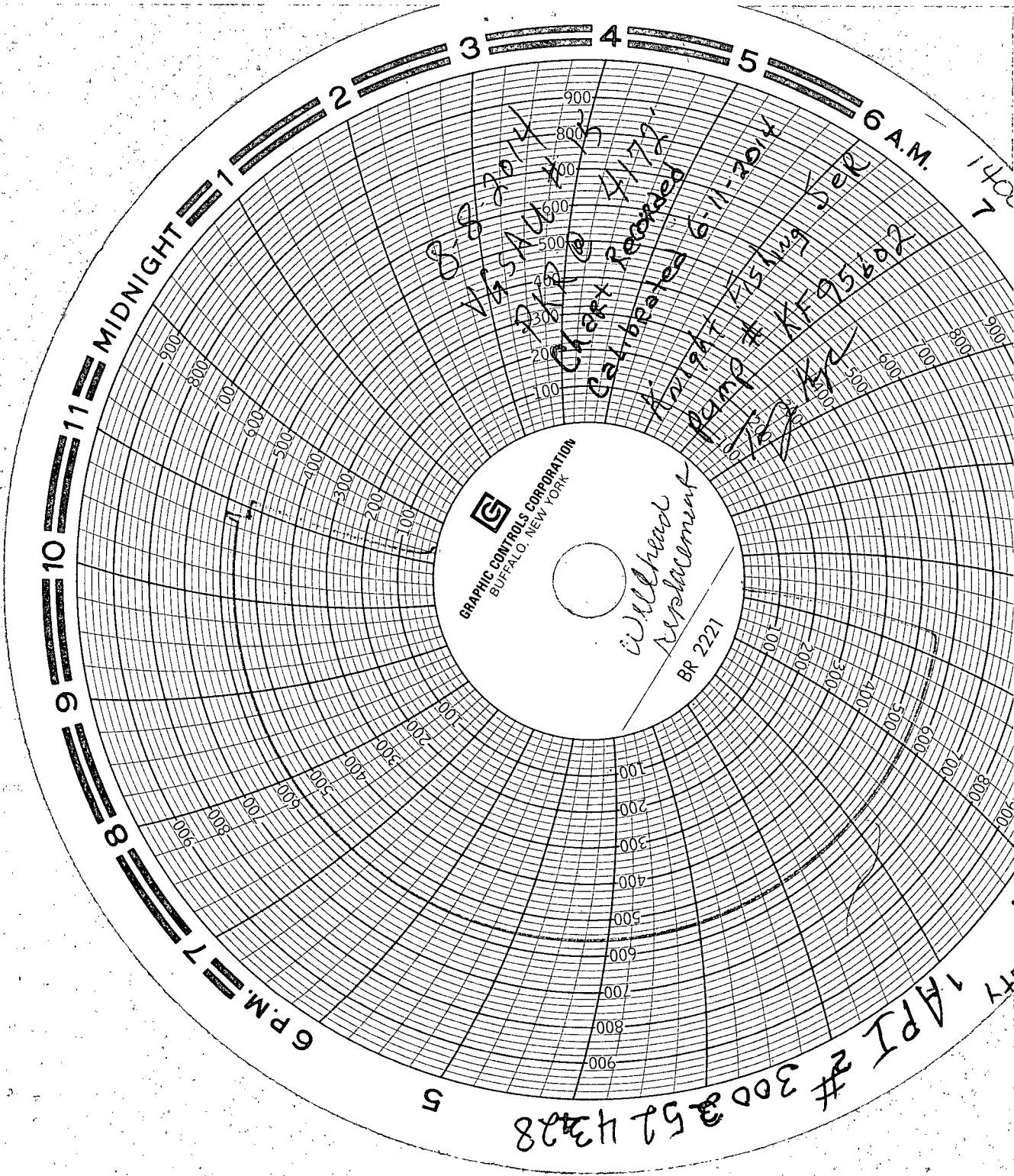
AS
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4531



GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK

Willhead
Replacement

BR 2221



GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK

Willard
Replacement
BR 2221

8-8-2014
VISA # 4172
Chart Recorded
Calibrated 6-11-2014
Night Fishing
pump # KF95602
Ser

API # 3003524328
1407