

DISTRICT I

P.O. Box 1980, Hobbs, NM 88240

DISTRICT II

P.O. Box Drawer DD, Artesia, NM 88210

DISTRICT III

1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

WELL API NO.	30-025-26790
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil / Gas Lease No.	857943
7. Lease Name or Unit Agreement Name	CENTRAL VACUUM UNIT
8. Well No.	146
9. Pool Name or Wildcat	VACUUM GRAYBURG SAN ANDRES
10. Elevation (Show whether DF, 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 DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMITS (FORM C-101) FOR SUCH PROPOSALS.

1. Type of Well: OIL WELL GAS WELL OTHER INJECTION

2. Name of Operator: CHEVRON USA INC

3. Address of Operator: 15 SMITH RD, MIDLAND, TX 79705

4. Well Location
Unit Letter G : 2465 Feet From The NORTH Line and 1335 Feet From The WEST Line
Section 31 Township 17S Range 35E NMPM LEA COUNTY

11. 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 OPERATION <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: _____ <input type="checkbox"/>		OTHER: COIL TBG CLEAN OUT <input checked="" type="checkbox"/>	

12. 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.

3-15-06: MIRU. TIH W/COIL TBG & SONIC HAMMER. TAG FILL FIRST TIME @ 4278. WASH THRU. TIH TO 4282. WASH THRU. SPOT 1 BBL ACID. WASH TUR TO 4300. WORK THRU. WASH TO 4304. WORK THRU. WASH TO 4322. WORK THRU. WASH TO 4450. WORK THRU. WASH TO 4792. PBTB @ 4795. PULL COIL BACK TO BTM & ACID WASH PERFS 4364-4683 W/REMAINING ACID, 22 BBLs 924 GALS OF 15% HCL. FLUSH W/FW. FLOW BACK TO TANK. RIG DOWN. FINAL REPORT



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 3/20/2006
 TYPE OR PRINT NAME Denise Pinkerton Telephone No. 432-687-7375

(This space for State Use)
 APPROVED Larry W. Wink TITLE OC FIELD REPRESENTATIVE II/STAFF MANAGER DATE MAR 23 2006
 CONDITIONS OF APPROVAL, IF ANY: _____