

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. 30-025-32801
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 #194
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 <input type="checkbox"/> Gas Well <input type="checkbox"/> Other INJECTION	
2. Name of Operator CHEVRON USA INC	
3. Address of Operator 1616 W. BENDER BLVD HOBBS, NM 88240	
4. Well Location Unit Letter <u>C</u> : <u>14</u> feet from the <u>NORTH</u> line and <u>1917</u> feet from the <u>WEST</u> line Section <u>06</u> Township <u>18S</u> Range <u>35E</u> NMPM County <u>LEA</u>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3133' GL	

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: REPAIR WELL AND MIT 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.

CHEVRON USA INC HAS TESTED THE ABOVE WELL, DUE TO A PREVIOUSLY FAILED MIT IN 2019

12/09/2020 MIRU WSU AND RU. BLEED DOWN WELL AND INSTALL BOP. SCAN OUT TUBING ALL YELLOW BAND. LAY DOWN ON/OFF TOOL AND TIH WITH KILL STRING.

12/10/2020 PULL OUT STRING & RIG UP HYDROTESTERS. CHANGE OUT SEALS ON ON/OFF TOOL & TIH LATCH ONTO PACKER & TEST TUBING AND PACKER. J-OFF & CIRCULATE PACKER FLUID. PERFORM MIT TEST. RIG DOWN WSU AND CLEAN LOCATION. TEST CASING TO 520 FOR 32 MIN.

ORIGINAL MIT CHART IS ATTACHED WITH A COPY.

Spud Date:

Rig Release Date:

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

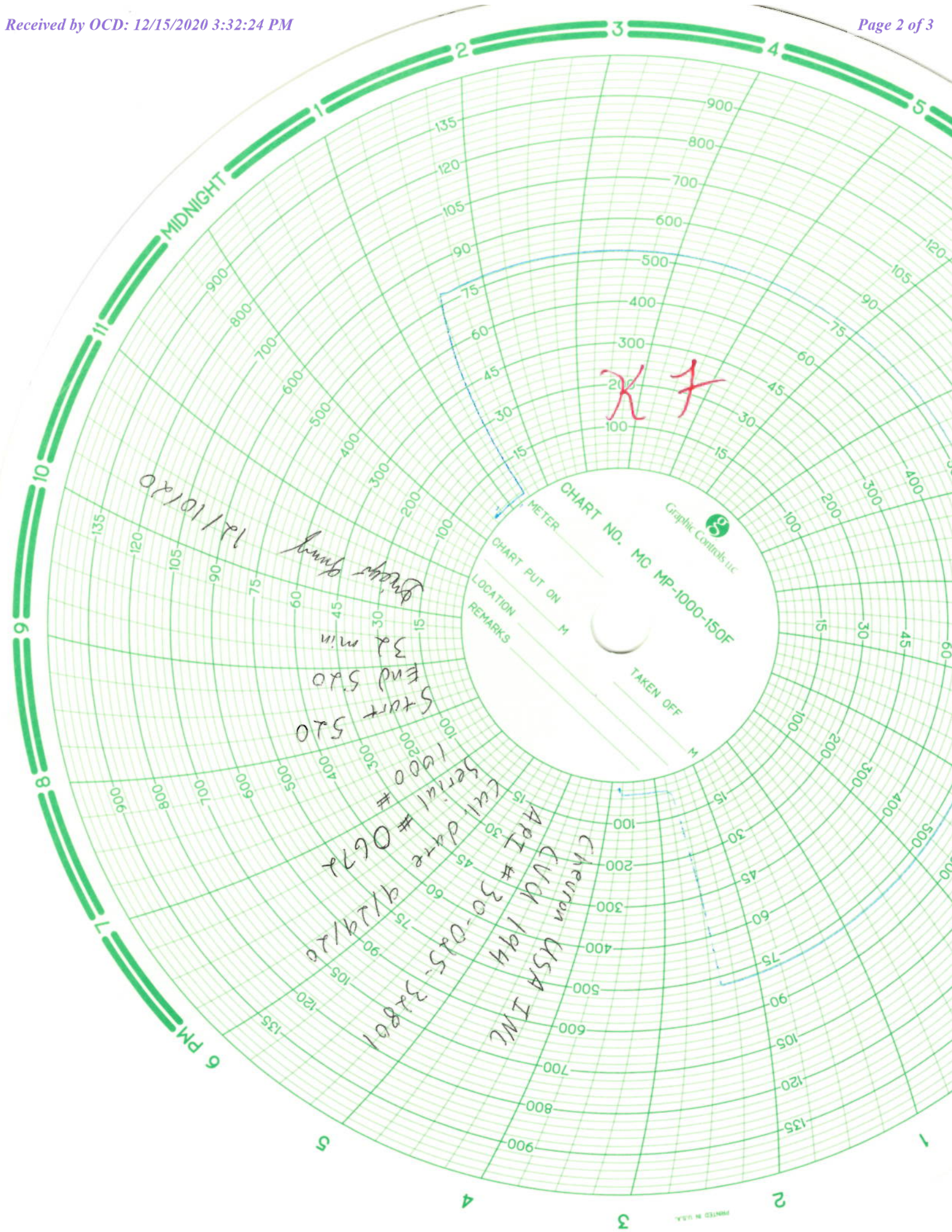
SIGNATURE _____ TITLE SR HSE REGULATORY AFFAIRS CO DATE 12/15/2020

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

For State Use Only

APPROVED BY: Kerry Fortner TITLE Compliance Officer A DATE 2/11/21

Conditions of Approval (if any)



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CONDITIONS

Action 12205

CONDITIONS OF APPROVAL

Operator:	CHEVRON U S A INC	6301 Deauville Blvd	Midland, TX79706	OGRID:	4323	Action Number:	12205	Action Type:	C-103Z
OCD Reviewer	Condition								
kfortner	None								