

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

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|---|
| WELL API NO. 3002527970 |
| 5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FE77E <input type="checkbox"/> |
| 6. State Oil & Gas Lease No. B 155 |
| 7. Lease Name or Unit Agreement Name CENTRAL VACUUM UNIT |
| 8. Well Number 160 |
| 9. OGRID Number |
| 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 ☐ **HOBBS OGD**

2. Name of Operator
CHEVRON U.S.A. **JUN 26 2015**

3. Address of Operator
15 SMITH ROAD MIDLAND, TX 79705 **RECEIVED**

4. Well Location
Unit Letter_ E _ : 2602 _feet from the _N_ line and _35_ feet from the _W_ line
Section 36 Township 17 S Range 34 E NMPM County LEA

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
4004 GR

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: **ANNUAL MIT TEST**

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 U.S.A. INC HAS CONDUCTED THE ANNUAL MIT TEST ON THE ABOVE WELL.
CHART ATTACHED.
PLEASE NOTE THIS TEST IS FOR UIC ANNUAL TESTING**

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:

A. Garcia

TITLE: **REGULATORY ASSISTANT** DATE: **16 June 2015**

Type or print name: **Adriann Garcia**

E-mail address: **Adriann.Garcia@chevron.com**

PHONE: **432-687-7617**

For State Use Only

APPROVED BY:

Bill Fernandez

TITLE:

Staff Manager

DATE:

7/2/2015

Conditions of Approval (if any):

JUL 16 2015

[Signature]

[Signature]

