

District I
1625 N. French Dr., Hobbs, NM 88240
Phone:(575) 393-6161 Fax:(575) 393-0720
District II
811 S. First St., Artesia, NM 88210
Phone:(575) 748-1283 Fax:(575) 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 167464

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 30-025-40463
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>1005</u> feet from the <u>N</u> line and <u>185</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 258
11. Elevation (Show whether DR, KB, BT, GR, etc.) 3991 GR		9. OGRID Number 4323
Pit or Below-grade Tank Application ☐ or Closure ☐ 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 _____		

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 OF PLANS ☐ PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐ Other: _____	SUBSEQUENT REPORT OF: REMEDIAL WORK ☐ ALTER CASING ☐ COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDON ☐ CASING/CEMENT JOB ☐ Other: Drilling/Cement ☒

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.
12-07:RAN 13 3/8",54.5#,J-55,SURF CSG TO 1515.12-10:CMT W/1200 SX,1.72
YIELD,13.6PPG LEAD.DID NOT GET CMT TO SURF.FLOATS HELD 1245PSI FOR 10 MINS.PRESS UP TO 1400 PSI.HELD
CMT IN PLACE.WOC.TAG CMT @ 232. 12-11:CMT W/400 SX,1.32Y,14.8PPG LEAD CMT.12-12:DRILL SHOE 1428-
1522.TAG CMT @ 1428. DRILL 1522-3225.12-15:RAN 9 5/8",36#,J-55,LTC CSG @ 3217.CMT W/312SX,1.97Y,CL C LEAD, &
TAIL 50 SX,1.51Y,CL C.FULL RETURNS, 40 BBLS CMT TO SURF.WOC.12-16/12-20:DRILL 3235-5100TD.12-
21:RAN7",23#,J-55,LTC CSG @ 5091.CMT W/450 SX,1.26Y,CL C,&TAIL 350 SX,1.08Y,EVERCRETE.12-23:RELEASE 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		17.5	13.375	54.5		232	1515	1200						
	Int1		12.25	9.625	36		0	3217	862						
	Prod		8.75	7	23		0	5091	800						

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 5/20/2013

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 5/20/2013 1:28:05 PM