

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.	30-025-02959
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.	50
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 PERMIT (FORM C-101) FOR SUCH PROPOSALS.

1. Type of Well:	OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator	CHEVRON USA INC
3. Address of Operator	15 SMITH ROAD, MIDLAND, TX 79705
4. Well Location	Unit Letter <u>D</u> : <u>510</u> Feet From The <u>NORTH</u> Line and <u>535</u> Feet From The <u>WEST</u> Line Section <u>31</u> Township <u>17S</u> Range <u>35E</u> NMPM <u>LEA</u> COUNTY
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	

11. 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 ☐  
OTHER: ☐

**SUBSEQUENT REPORT OF:**

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPERATION ☐ PLUG AND ABANDONMENT ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER: REPAIR SURF CSG, SQZ HOLES IN 7" CSG ☒

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.

5-21-04: MIRU PU & RU. 5-24-04: KILL CSG W/75 BBLS BW. TIH W/PKR & RBP. SET PLUG @ 2480. PKR @ 2450.  
5-25-04: TIH W/PKR TO ISOLATE HOLES 280'-342' WILL CIRC TO SURF CSG BUT 342-677' WILL NOT CIRC.  
5-26-04: CSG ON VAC. TIH TO 2003. DISPL W/120 BFW. DUMP 3 SX SAND ON PLUG. 5-27-04: DIG OUT AROUND WH. REPAIR SURF RISER.  
5-28-04: INSTL NEW 7" CSG. ESTAB CIRC TO SURF CSG W/1.5 BBLS FW. CIRC CMT TO SURF. TOC @ 200'. 6-01-04: TAG CMT @ 212. DRILL OUT TO 342. DRILL OUT TO 375. 6-02-04: BROKE CIRC W/7 BFW. DRILL CMT FR 375-510. FELL THRU. WENT TO 685.  
6-03-04: SICP ON VAC. PERFORMED HESITATION SQUEEZE @ 1/2 BBL INCREMENTS @ 330'. SQZ PRESS BROKE FR 307# TO 240#. FINISH DISPLACEMENT TO 490 W/17 1/2 BBLS TOTAL. PUMP 50 SX RFC CMT & 200 SX CL C W/2% CACL @ 3 BBL/MIN. DISPL W/1 BBL FW. WASH UP TO REV PIT. HESITATION SQUEEZE @ 120' & SQZ PRESSURE WAS 620#.  
6-04-04: TAG CMT @ 63'. DRILL CMT FR 63-67' & FELL THRU. DRILL STRINGERS TO 118. CMT HARD. DRILLED CMT TO 135. DRILL CMT TO 257.  
6-07-04: DRILLED TO 485'. FELL THRU. WENT TO 561'. TIH W/62 JTS TO TAG SAND ON RBP @ 2488. WASH 4' OF SAND OFF RBP TO 2492'.  
6-08-04: NU WH FLANGE WITH BULL PLUG. RIG DOWN.

**FINAL REPORT**

\*\*\*\*\*ADDITIONAL INFORMATION\*\*\*\*\*

7-01-04: CUT 7" CSG OFF 15" BELOW GROUND LEVEL. INSTAL WH. WELD ON TO CSG & TEST TO 600#. MIRU PU. NUBOP.  
7-02-04: TAG SAND @ 2482. CLEAN 18' FORMATION & SAND DN TO PLUG @ 2500'. WELL STARTED BLOWING.  
7-06-04: TAG @ 4713. C/O TO 4717. 7-08-04: TIH TO 4087. TIH W/CIBP & SET @ 4070. TIH W/PKR TO TEST CIBP TO 1000# FOR 15 MINS. TOH W/PKR. 7-09-04: TIH W/SHOE @ 4065. FC @ 4019. 7-12-04: CUT 5 1/2" LINER & INSTALLED TBG WELL HEAD. LINER SET @ 4065'. TEST CSG FOR NMOCD. TAG CMT @ 4006. 7-13-04: DRILL CMT FR 4006-4019. DRILLED CMT TO CSG SHOE @ 4065. DRILL CMT & CIBP @ 4070. DRILL THRU CIBP. PUSH CIBP TO 4717. 7-14-04: PU 141 JTS PROD TBG TO 4518. 2 7/8" PROD TBG 4465.07'. BTM OF TBG @ 4475.07'. DRAIN VALVE @ 4476, TBG SUB @ 4480, CHECK VALVE @ 4480, PUMP @ 4498, GAS SEP @ 4502, SEAL @ 4509, MOTOR @ 4518. 7-15-04: INSTL QCI HANGERS. HU FLOW LINE. TEST RUN SUB PUMP-GOOD. RIG DOWN. RESTART SUB PUMP. FINAL REPORT

\*\*\*\*\*ORIGINAL CHART & COPY OF CHART ATTACHED\*\*\*\*\*

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

SIGNATURE Denise Leake TITLE Regulatory Specialist

TYPE OR PRINT NAME Denise Leake

DATE 7/20/2004

Telephone No. 505 815 8823

(This space for State Use)

APPROVED Wayne Wink TITLE OC FIELD REPRESENTATIVE II/STAFF MANAGER

CONDITIONS OF APPROVAL, IF ANY:

DATE

JUL 27 2004

89303 ver 1.0

