

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
March 4, 2004

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-025-21830
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 Vacuum Glorieta West Unit
8. Well Number 1
9. OGRID Number
10. Pool name or Wildcat Vacuum Glorieta

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

2. Name of Operator
Chevron USA Inc

3. Address of Operator
15 Smith Rd, Midland, TX 79705

4. Well Location
Unit Letter E : 1980 feet from the North line and 830 feet from the West line
Section 24 Township 17-S Range 34-E NMPM Lea County

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

Pit or Below-grade Tank Application (For pit or below-grade tank closures, a form C-144 must be attached)

Pit Location: UL E Sect 24 Twp 17S Rng 34E Pit type Steel Depth to Groundwater 84 Distance from nearest fresh water well Over 1000'
Distance from nearest surface water 1980 feet from the North line and 830 feet from the West line (Steel Tank)

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"/>	REMEDIAL WORK <input type="checkbox"/>
PLUG AND ABANDON <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
MULTIPLE COMPLETION <input type="checkbox"/>	OTHER: <input 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

1. Notify OCD 24 hrs prior to MI and RU.
2. RIH Tag, CIBP at 5945, spot 25sx, plug from 5945-5800 (Glorieta) WOC Tag.
3. Displace hole w/MLF, 9.5# Brine w/12.5# gel P/BBL. 12.5#
4. Spot 25sx, plug from 4400-4200 (San Andres).
5. Spot 25sx, plug from 3900-3700 (Queen).
6. Spot 30sx, plug from 2800-2500 (Yates, B-Salt) WOC Tag.
7. Spot 30sx, plug from 1800-1500 (8 5/8 Shoe, T-Salt) WOC Tag.

8. Spot 30sx, plug from 300-Surf (Surf) WOC Tag.
9. Install dry hole marker.

THE COMMISSION MUST BE NOTIFIED 24 HOURS PRIOR TO THE BEGINNING OF PLUGGING OPERATIONS FOR THE C-103

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 _____ TITLE Operations Supervisor DATE _____
Type or print name F. W. Minchew E-mail address: _____ Telephone No. 505-396-4414

(This space for State use)

APPROVED BY Hayward Wink TITLE FIELD REPRESENTATIVE II/STAFF MANAGER DATE AUG 19 2004
Conditions of approval, if any: _____

AUG 19 2004