

**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.	30-025-03077
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil / Gas Lease No.	B-1113-1
7. Lease Name or Unit Agreement Name	CENTRAL VACUUM UNIT
8. Well No.	105
9. Pool Name or Wildcat	VACUUM GRAYBURG SAN ANDRES

<p align="center"><b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.</p>	
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>E</u> : <u>1980</u> Feet From The <u>NORTH</u> Line and <u>484</u> Feet From The <u>WEST</u> Line Section <u>6</u> Township <u>18S</u> Range <u>35E</u> NMPM <u>LEA</u> COUNTY
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	3942' GL

11.

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

**NOTICE OF INTENTION TO:**

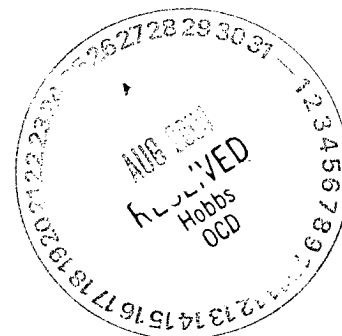
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐  
OTHER: ☐

**SUBSEQUENT REPORT OF:**

REMEDIAL WORK ☒ ALTERING CASING ☐  
COMMENCE DRILLING OPERATION ☐ PLUG AND ABANDONMENT ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER: ☐

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.

8-17-04: KILL WELL W/110 BBLS BRINE WATER. DROP BAR ON DRAIN VALVE. TIH W/80 JTS TBG FOR KILL STRING.  
8-18-04: START WELL ON PRODUCTION. BLEED DN CSG & TBG TO REV PIT. KILL W/90 BBLS BRINE. TIH W/146 JTS 2 7/8" TBG TO 4537.  
INSTL WELLHEAD & MAKE WIRE CONNECTION. LAND TBG HANGER. INSTL WIRING HARNESS. CHECK ROTATION & RUN PUMP. TOOK 8 MINUTES TO GET FLUID TO SURFACE.  
RIG DOWN & CLEAN LOCATION. START PUMP BACK TO PRODUCTION & LEFT RUNNING.



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 DATE 8/23/2004  
TYPE OR PRINT NAME Denise Leake Telephone No. 915-687-7375

(This space for State Use)

APPROVED Harry W. Winn FIELD REPRESENTATIVE II / STAFF MANAGER  
CONDITIONS OF APPROVAL, IF ANY: TITLE

DATE AUG 27 2004  
DeSoto/Nichols 12-93 ver 1.0