State of New Mexico

Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

Submit 3 copies to Appropriate District Office

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.

30-025-03089

5. Indicate Type of Lease

STATE 🗸 FEE 🗌

State Oil / Gas Lease No.

CENTRAL VACUUM UNIT

7. Lease Name or Unit Agreement Name

96

VACUUM GRAYBURG SAN ANDRES

857943

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 PERMI
(FORM C-101) FOR SUCH PROPOSALS

Township 18S

OIL 1. Type of Well: V WELL WELL **OTHER**

2. Name of Operator CHEVRON USA INC

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

4. Well Location

Section 6

660

__Feet From The __NORTH__Line and _1980_

Range 35E

NMPM

8. Well No.

_Feet From The <u>EAST</u>

9. Pool Name or Wildcat

LEA COUNTY

_Line

10. Elevation (Show whether DF, RKB, RT,GR, etc.)

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

NOTICE OF INTENTION TO:			SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK		PLUG AND ABANDON		REMEDIAL WORK ALTERING CASING		
TEMPORARILY ABANDON		CHANGE PLANS		COMMENCE DRILLING OPERATION PLUG AND ABANDONMENT		
PULL OR ALTER CASING				CASING TEST AND CEMENT JOB		
OTHER:				OTHER: PULL TBG, RODS, CLEAN OUT TO PBTD, ACID		

9-22-04: MIRU. SET IN FRAC TANKS. LD RODS & PMP. TIH W/84 RODS.

9-23-04: PUMP 35 BBLS 10 PPG BRINE. TIH & TAG PBTD @ 4661. NO FILL. TIH W/PKR & SET @ 4010.

9-24-04: ACIDIZE W/2500 GALS 15% HCL. WELL ON VAC. RU SWAB. 3 RUNS. PUMP 165 GALS TH-756 MIXED IN 35 BBLS FW.

9-27-04: REL PKR. TIH W/MJ, SN, 2 3/8" TBG, . EOT @ 4651'. SET PKR W/8 PTS. TIH W/GAS ANCHOR, PUMP, & RODS. COULD NOT GET PUMP PAST PKR.

9-28-04: UNSET PKR. TOH W/TBG TO PKR. REPAIR PKR. TIH W/125 JTS TBG. SET PKR W/8 PTS TENSION. TIH W/GAS ANCHOR, 2"X1 1/2"X24' PUMP, & RODS. SPACE OUT WELL & LOAD TBG. TEST TBG TO 500 PSIG. OK. RIG DOWN.

FINAL REPORT

A									
I hereby certify that the information above is true and complete taken best of on knowledge and belief.									
SIGNATURE	e race	TITLE_	Regulatory Specialist	DATE 9	/30/2004				
TYPE OR PRINT NAME	Denise Leake			Telephone No.	915-687-7375				

OC FIELD REPRESENTATIVE II/STAFF MANAGER OCT 1 2 2004

^{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.