Submit 1 Copy To Appropriate District Office	State of New Me		Form C-103
District I – (575) 393-6161 1625 N French Dr., Hobbs, NM 882410BB	Energy, Minerals and Natu	ral Resources	Revised August 1, 2011 WELL API NO.
<u>District II</u> – (5/5) /48-1283	OIL CONSERVATION	DIVISION	30-025-38637
811 S First St , Artesia, NM 88210 <u>District III</u> – (505) 334-6178	18 2012 1220 South St. Fran		5. Indicate Type of Lease  STATE   FEE   ✓
District III – (505) 334-6178 1000 Rio Brazos Rd, Aztec, NM 87410  District IV – (505) 476-3460	Santa Fe, NM 87		STATE FEE 6. State Oil & Gas Lease No.
400000000000000000000000000000000000000	CEIVED		1
SUNDRY NOTIC	CES AND REPORTS ON WELLS		7. Lease Name or Unit Agreement
(DO NOT USE THIS FORM FOR PROPOSA DIFFERENT RESERVOIR. USE "APPLICA			CENTRAL VACUUM UNIT  8. Well Number 455
PROPOSALS)  1. Type of Well: Oil Well   (	Gas Well  INJECTOR /		6. Well Nulliber 433
2. Name of Operator	/		9. OGRID Number 4323
CHEVRON U.S.A. INC.			10. Parl name on Wildow
3. Address of Operator 15 SMITH ROAD, MIDLAND, TE	XAS 79705		10. Pool name or Wildcat Vacuum Grayburg San Andres
4. Well Location			
Unit Letter D: 1310 feet from the NORTH line and 660 feet from the WEST line			
Section 36 Township 17-S Range 34-E NMPM County LEA			
11. Elevation (Show whether DR, RKB, RT, GR, etc.)			
			1100 11
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:			
	PLUG AND ABANDON	REMEDIAL WORK	
<del>_</del>	CHANGE PLANS	COMMENCE DRIL	<del>_</del>
	MULTIPLE COMPL	CASING/CEMENT	JOB $\square$
DOWNHOLE COMMINGLE			
OTHER:		OTHER:	
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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.			
Wall has failed the MIT has denked to	ost on 11 16 2011. Charman mlana	An :	
integrity of the well.	est on 11-16-2011. Chevron plans	to investigate the ca	use of the failure and restore the mechanical
	<del></del>	<u></u>	
Spud Date:	Rig Release Da	ite:	
L			
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
A	•	io or my imo monego	
SIGNATURE DATE: 01-16-2012			
Type or print name: DENISE PINK PRTON E-mail address: leakejd@cvhevron.com PHONE: 432-687-7375			
APPROVED BY: Wash Whitaham TITLE Compliance Officer DATE 1-20-2012			
Conditions of Approval (if any):			