

Submit 1 Copy To Appropriate District Office  
District I - (575) 393-6161  
1625 N. French Dr., Hobbs, NM 88240  
District II - (575) 748-1283  
811 S First St., Artesia, NM 88210  
District III - (505) 334-6178  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV - (505) 476-3460  
1220 S. St Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources  
OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505  
RECEIVED  
FEB 10 2012

Form C-103  
Revised August 1, 2011

WELL API NO. 30-025-26001	
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 CENTRAL VACUUM UNIT	
8. Well Number 141	
9. OGRID Number 4323	
10. Pool name or Wildcat VACUUM GRAYBURG SAN ANDRES	
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 <input type="checkbox"/> Gas Well <input type="checkbox"/> Other INJECTION <input checked="" type="checkbox"/>	
2. Name of Operator CHEVRON U.S.A. INC.	
3. Address of Operator 15 SMITH ROAD, MIDLAND, TEXAS 79705	
4. Well Location Unit Letter M: 10 feet from the SOUTH line and 1310 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.)	

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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
OTHER:		OTHER CASING REPAIR	

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.

12-28-11: MIRU. 12-30-11: REL PKR. PUMP 60 BBLS 14.5 MUD. 1-03-12: TIH W/PERF GUN & TAG @ 4256. SHOOT PERF HOLES @ 4239. CIRC W/14.5 MUD. 1-05-12: TIH W/BIT & TAG @ 4619. PUMP 300 BBLS 10# BRINE. 1-06-12: TIH TAG @ 4619. C/O 4609-4619. 1-07-12: C/O TO 4656. TAG TOP OF FISH IN HOLE. 1-09-12: SET RBP @ 4250. SET PKR @ 4219. 1-10-12: m DISPLACE 14.5 PPG MUD W/10 PPG BRINE. 1-11-12: REL PKR. 1-12-12: TEST CSG @ 2785, 1413, 695, 306, 38. HELD EACH TIME. UNSET PKR. SET RBP @ 2001. EOT @ 4187. 1-13-12: DUMP 8' SAND DN 4 1/2" CSG. 1-14-12: CIRC SAND OFF RBP. LATCH & REL RBP. 1-17-12: TIH & LATCH ONTO RBP. REL WELL FLOWING. 1-18-12: REL RBP @ 4250. PU BHA. SET PKR @ 4256/ CIRC W/2% KCL WTR. 1-19-12: CHART & TEST FOR NMOCD. (ORIGINAL CHART & COPY OF CHART ATTACHED) TEST CSG TO 560 PSI FOR 30 MINUTES. PKR SET @ 4255. PERFS: 4360-4758.

Spud Date:

Rig Release Date:

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

SIGNATURE Denise Pinkerton TITLE: REGULATORY SPECIALIST DATE: 02-09-2012

Type or print name: DENISE PINKERTON E-mail address: leakejd@chevron.com PHONE: 432-687-7375

APPROVED BY: [Signature] TITLE: 21111111 DATE: 2-16-2012  
Conditions of Approval (if any):

FEB 16 2012

