Submit 1 Copy To A	Appropriate District	State of New 1	Mexico	/	Form C-103
Office . <u>District I</u>		Energy, Minerals and N	atural Resources		October 13, 2009
1625 N. French Dr	inct I 5 N. French Dr , Hobbs, Massaco irict II 1 W Grand Ave., Artesia, NM 88210  Energy, Minerals and Natural Resources OIL CONSERVATION DIVISION			WELL API NO. / 30-025-24316	,
1301 W Grand Ave				5. Indicate Type of Lease	
District III	One Rio Brazos Rd., Azice, NM 8751 2012 1220 South St. Francis Dr.  Santa Fe, NM 87505				FEE 🗌
District IV Santa Fe, NM 87505			6. State Oil & Gas Lease		
1220 S. St. Francis Dr., Santa Fe, NM 87505					
SUNDRY NOTICES AND REPORTS ON WELLS				7. Lease Name or Unit Ag	greement Name
(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)					
					VACUUM GRAYBURG SAN ANDRES
1. Type of Well: Oil Well Gas Well Other INJECTION				UNIT 8. Well Number 17	
2. Name of Ope CHEVRON U.S				9. OGRID Number 432	3
3. Address of Operator				10. Pool name or Wildcat	
15 SMITH ROAD, MIDLAND, TEXAS 79705				VACUUM GRAYBURG	S/A
4. Well Location					
Unit Letter I: 1400 feet from the SOUTH line and 10 feet from the EAST line					
Section 2 Township 18S Range 34E NMPM County LEA					
11. Elevation (Show whether DR, RKB, RT, GR, etc.)					
PERFORM REM TEMPORARILY PULL OR ALTE DOWNHOLE CO OTHER: 13. Describe of starting propose 7-02-12: NO PRESS TO	NOTICE OF INT MEDIAL WORK  ABANDON  AR CASING  OMMINGLE  Exproposed or completing any proposed world completion or recondition of the completion of the comp	PLUG AND ABANDON CHANGE PLANS MULTIPLE COMPL Cted operations. (Clearly state a k). SEE RULE 19.15.7.14 NM mpletion.  RAN CHART. (COPY OF CH	SUB REMEDIAL WOR COMMENCE DR CASING/CEMEN  OTHER: SPEC all pertinent details, an	SSEQUENT REPORT  RK	A
		<del></del>	,		
Spud Date:		Rig Release	Date:		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.					
I hereby certify the	nat the information al	oove is true and complete to the	e best of my knowledg	ge and belief.	
SIGNATURE SECULATORY SPECIALIST DATE 07-11-2012					
Type or print name DENISE PINKERTON E-mail address: leakejd@chevron.com PHONE: 432-687-7375  For State Use Only					
APPROVED BY: DATE 1-30 Z01Z Conditions of Approval (if any):					
	/ (	/			

