

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
HOBBS OCD
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505
RECEIVED
MAR 14 2014

Form C-103
Revised July 18, 2013

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.)		WELL API NO. 30-025-23835
1. Type of Well: Oil Well ☐ Gas Well ☐ Other <u>INJ</u>		5. Indicate Type of Lease STATE ☒ FEE ☐
2. Name of Operator CHEVRON U.S.A. INC.		6. State Oil & Gas Lease No.
3. Address of Operator 15 SMITH ROAD, MIDLAND, TEXAS 79705		7. Lease Name or Unit Agreement Name NORTH VACUUM ABO WEST UNIT
4. Well Location Unit Letter: H 1852 feet from NORTH line and 554 feet from the EAST line Section 28 Township 17S Range 34E NMPM County LEA		8. Well Number 17
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. OGRID Number 4323
		10. Pool name or Wildcat VACUUM

12. 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 ☐ MULTIPLE COMPL ☐
DOWNHOLE COMMINGLE ☐
CLOSED-LOOP SYSTEM ☐
OTHER:

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐

OTHER: ANNUAL MIT W/CHART

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.

03/07/2014: NOTIFIED NMOCD. RAN CHART. PRESS TO 550 PSI FOR 40 MINUTES. (ORIGINAL CHART & COPY OF CHART ATTACHED).

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 03/13/2014

Type or print name DENISE PINKERTON
For State Use Only

E-mail address: leakejd@chevron.com

PHONE: 432-687-7375

APPROVED BY:

DENIED

DATE

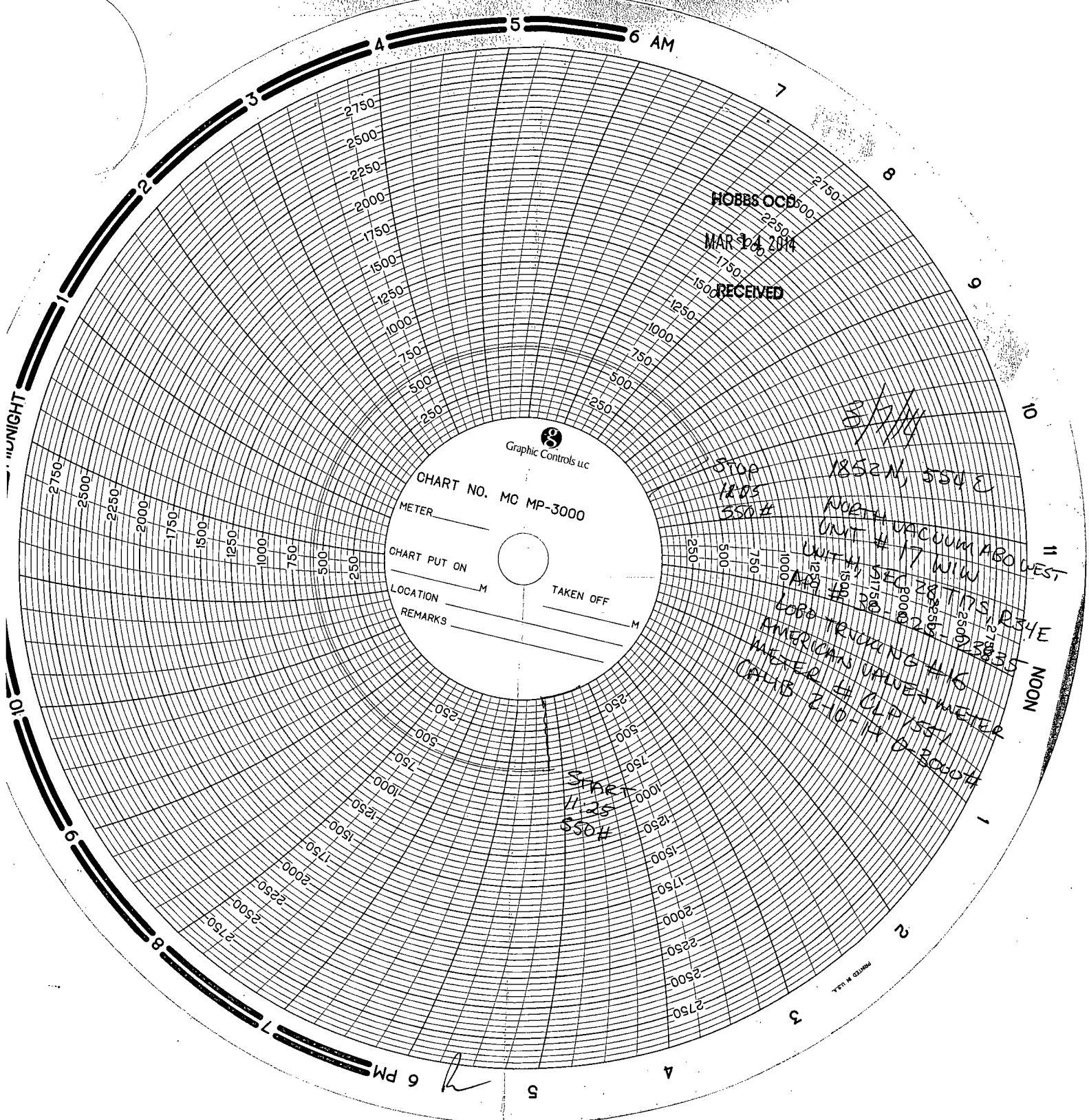
Conditions of Approval (if any):

TEST TO BE ON 1000# CHART
NOT 3000#.

MSB
3/18/2014

Condition of Approval: notify
OCD Hobbs office 24 hours
prior of running MIT Test & Chart

MAR 20 2014



HOBBS OCS
MAR 14 2014
RECEIVED

3/7/14

STOP 1852N, 554E
1203
350#
NORTH VACUUM ABOVE WEST
UNIT # 17 W1W
UNIT # 17 SEC 28 T17S R34E
4000 TRUCKING #16
AMERICAN VALVE METER
METER # CLP/55/
CALIB 2-10-14 0-3000#

START
11:25
550#

h

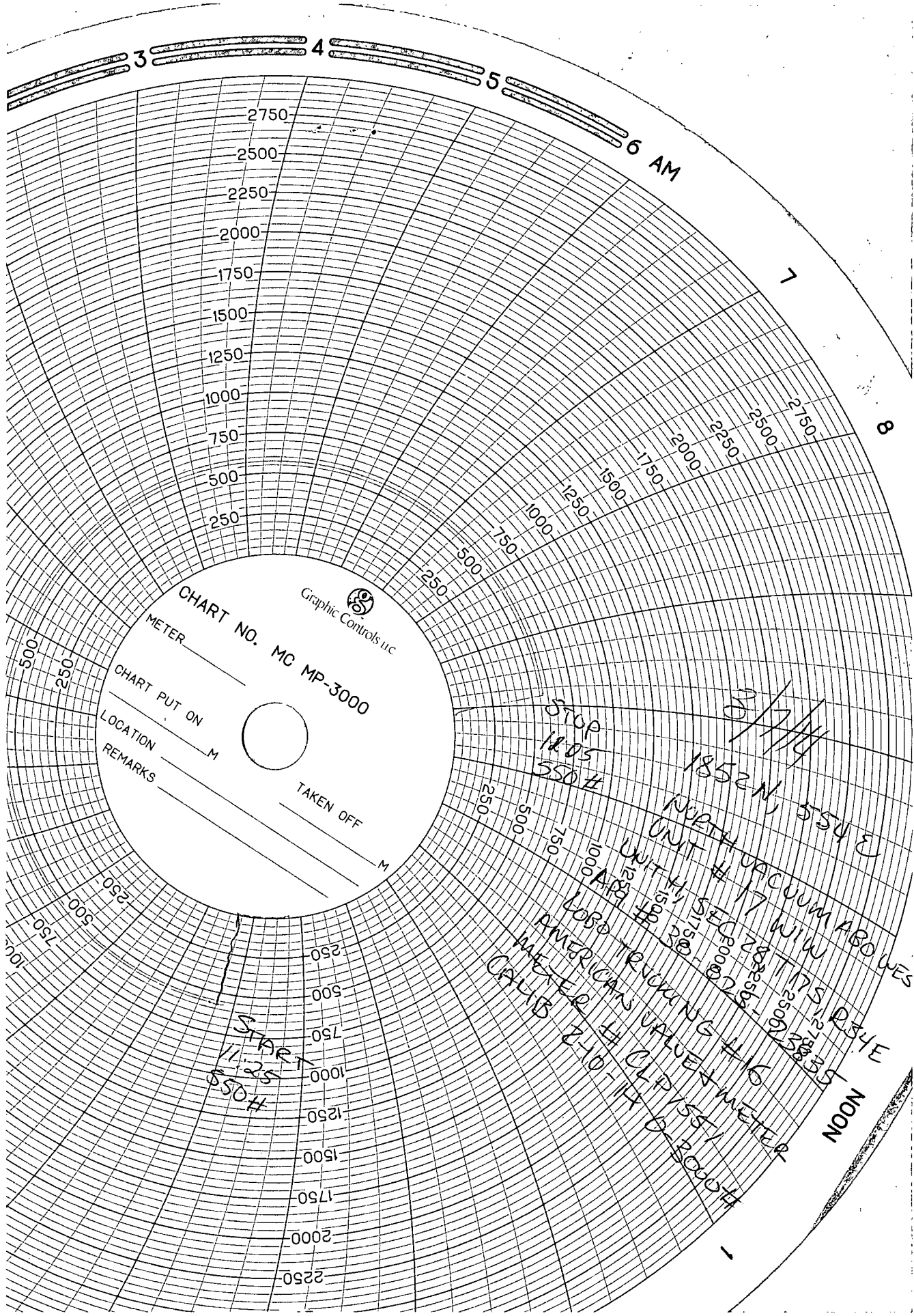


CHART NO. MC MP-3000

Graphic Controls, Inc.

METER _____

CHART PUT ON _____

LOCATION _____

REMARKS _____

TAKEN OFF _____

START
1125
550#

STOP
1805
550#

8/7/14
1852N, 554E

NORTH UNIT #17
UPACUM ABOVE
UNIT #17
WILW

LOBO TRUCKING
AMERICAN VALVE #16
METER #16
CALIB #10
2-10-14

NOON

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HOBBS OGD

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

DEC 13 2013

RECEIVED

WELL API NO. 30-025-23835
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6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name NORTH VACUUM ABO W UNIT
8. Well Number 17
9. OGRID Number 4323
10. Pool name or Wildcat VACUUM ABO, NORTH
11. Elevation (Show whether DR, RKB, RT, GR, etc.)

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3. Address of Operator 15 SMITH RD, MIDLAND, TX 79705	
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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 ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	P AND A ☐
PULL OR ALTER CASING ☐	MULTIPLE COMPL ☐	CASING/CEMENT JOB ☐	
DOWNHOLE COMMINGLE ☐			
CLOSED-LOOP SYSTEM ☐			
OTHER: ☐		OTHER: ☐	

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ANNUAL MIT CHART

Failed Mit Test Due To
Time of Test. Must Reach
30 minutes Minimum. 8/18/2014

Violation
Letter 1/2014

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 Cindy Herrera-Murillo TITLE PERMITTING SPECIALIST DATE 12/12/2013

Type or print name CINDY HERRERA-MURILLO E-mail address: Cherreramurillo@chevron.com PHONE: 575-263-0431

For State Use Only

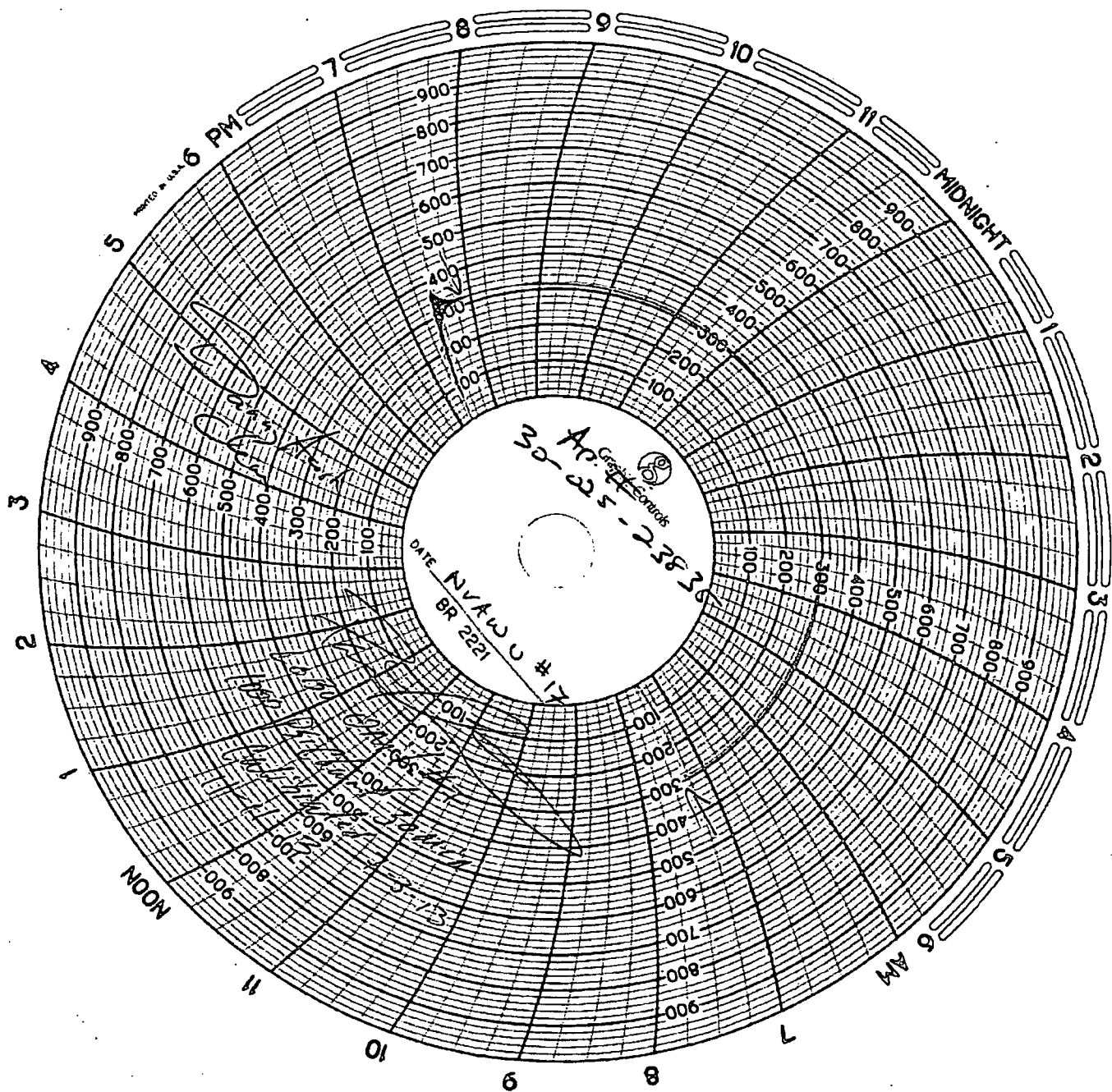
APPROVED BY: lhb/ced TITLE lhb/ced DATE 1/27/2014

Conditions of Approval (if any):

FOR RECORD ONLY

JAN 27 2014

HOBBS OCD
DEC 13 2013
RECEIVED



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