

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  
**HOBBS, OCD**  
 Energy, Minerals and Natural Resources  
**MAR 10 2014**  
**CONSERVATION DIVISION**  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505  
**RECEIVED**

Form C-103  
 Revised July 18, 2013

WELL API NO. 30-025-23905 ✓
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 NORTH VACUUM ABO WEST UNIT ✓
8. Well Number 15H ✓
9. OGRID Number 4323
10. Pool name or Wildcat VACUUM

**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  Gas Well  Other  **INT**

2. Name of Operator  
CHEVRON U.S.A. INC. ✓

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

4. Well Location  
 Unit Letter: D 660 feet from NORTH line and 660 feet from the WEST line ✓  
 Section 27 Township 17S Range 34E 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

<b>NOTICE OF INTENTION TO:</b> PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER:	<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: ANNUAL MIT W/CHART
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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 30 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 E-mail address: leakejd@chevron.com PHONE: 432-687-7375  
 For State Use Only

APPROVED BY: \_\_\_\_\_ DATE \_\_\_\_\_  
 Conditions of Approval (if any):

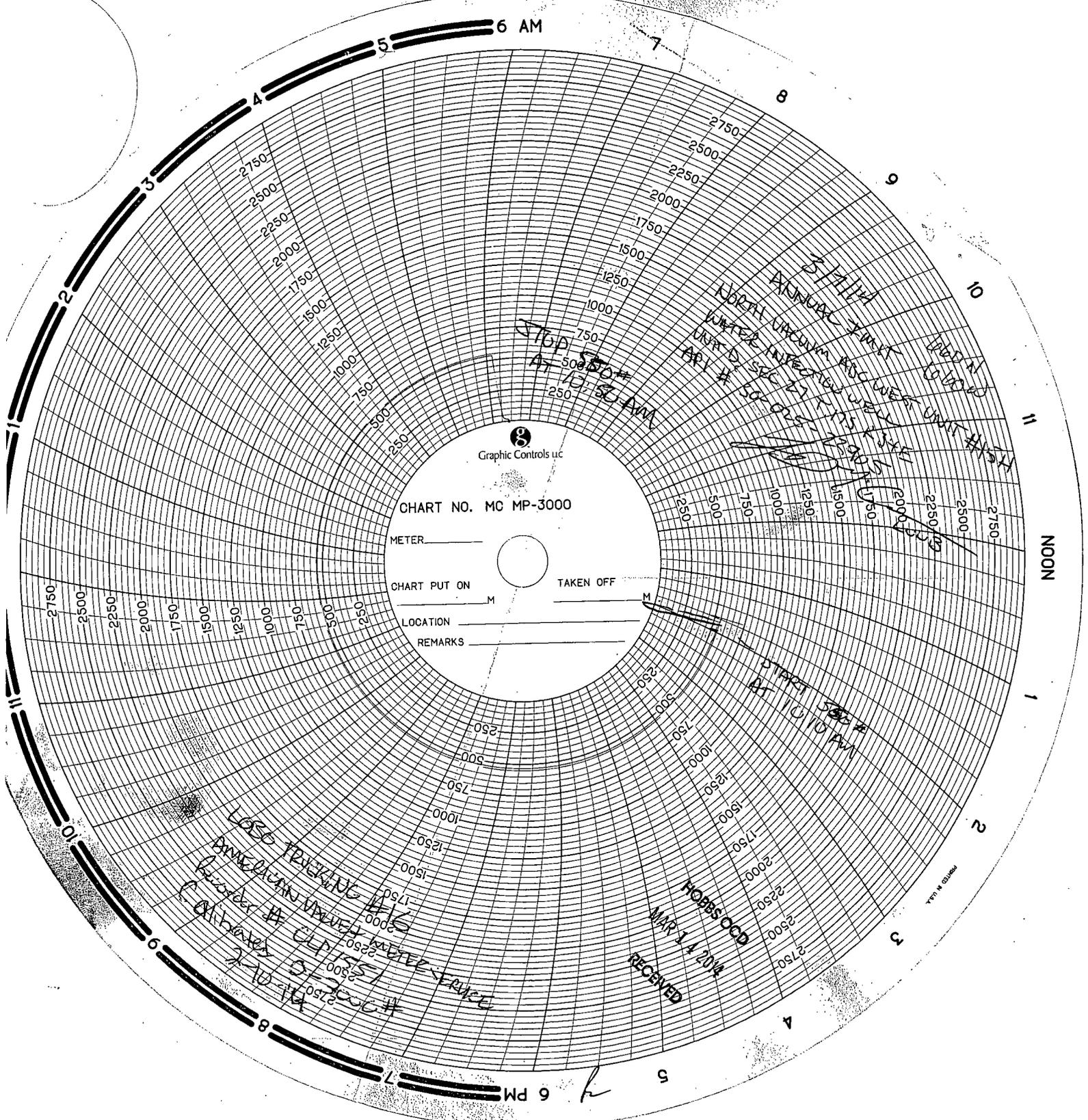
**DENIED**

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

**TEST TO BE ON 1000# CHART  
 NOT 3000# YMSB 3/18/2014**

*[Handwritten signature]*

MAR 20 2014



Graphic Controls Inc

CHART NO. MC MP-3000

METER \_\_\_\_\_  
CHART PUT ON \_\_\_\_\_ M TAKEN OFF \_\_\_\_\_ M  
LOCATION \_\_\_\_\_  
REMARKS \_\_\_\_\_

LOOSE TALKING  
BANKRUPTCY  
COURTS  
CLINTON  
GREEN RICE

PHILIP  
ARUNDA  
NORTH VIRGINIA  
UNITED STATES  
APR 1 1964  
500 #

PT. 10 10 AM

RECEIVED  
MAR 1 20 1964

1711 1/2 1/2

6 AM

5

7

8

9

10

11

Graphic Controls Inc

CHART NO. MC MP-3000

METER \_\_\_\_\_

CHART PUT ON \_\_\_\_\_

TAKEN OFF \_\_\_\_\_

LOCATION \_\_\_\_\_

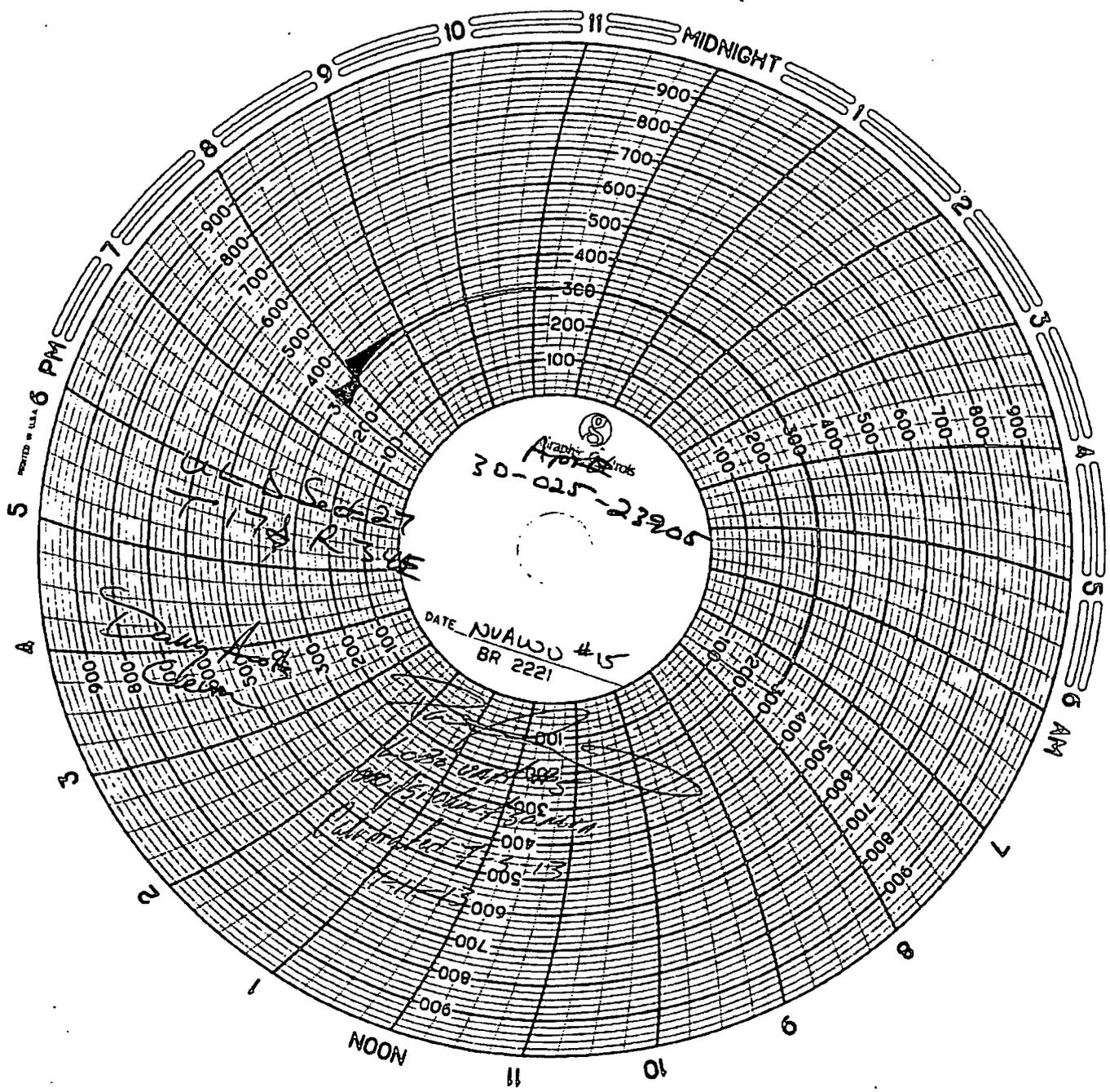
REMARKS \_\_\_\_\_

3/11/14  
 NORTH VACUUM UNIT  
 WATER INJECTED WEST UNIT #57  
 UNIT D SEC 27 T 17 S R 15 E  
 API # 50-025-1515  
 STOP AT 10:50 AM

START AT 10:10 AM

PRINTED IN U.S.A.





HOBBS OGD  
 DEC 18 2013  
 RECEIVED

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