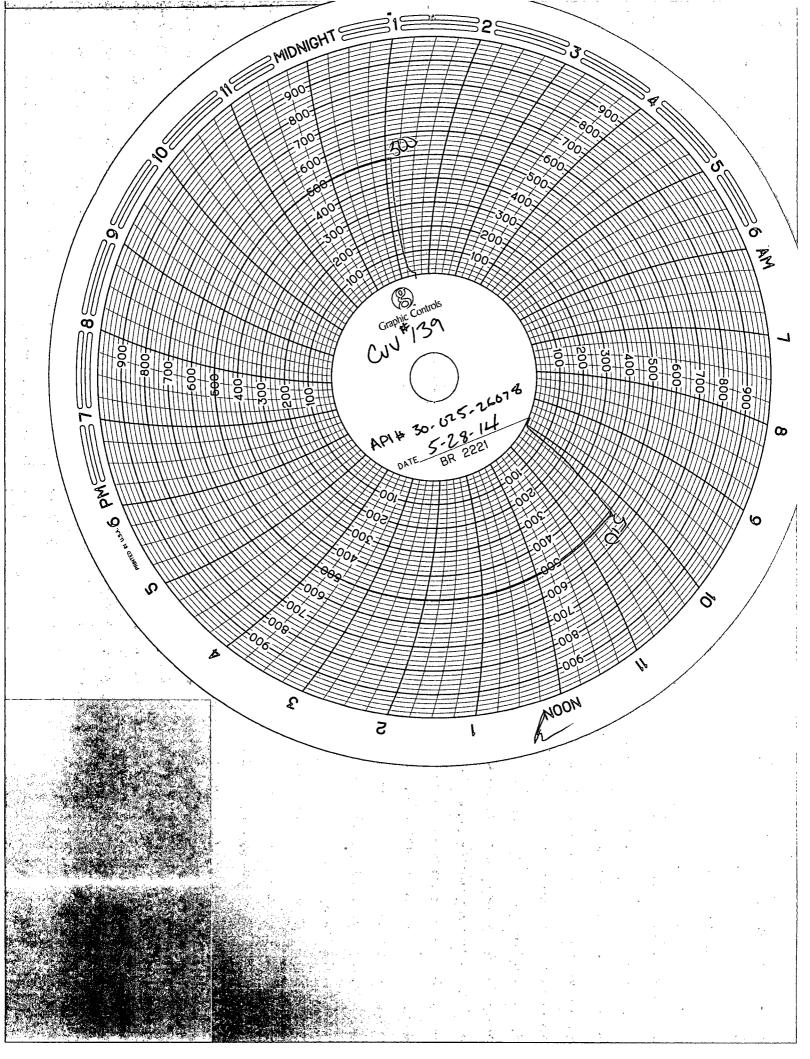
Submit 1 Copy To Appropriate District Office	State of New Interaction			Form C-103
<u>District I</u> ~ (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals	and Natu	ral Resources	Revised July 18, 201 WELL API NO.
<u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210	District II - (575) 748-1283 OIL CONSERVATION DIVISION			3002526078
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 1220 South St. Francis Dr. Santa Fe, NM 87505			5. Indicate Type of Lease STATE FEE	
			6. State Oil & Gas Lease No. B-155-1	
87505 SUNDRY NOTION	CES AND REPORTS OF	N WELLS		7. Lease Name or Unit Agreement 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.)				CENTRAL VACUUM UNIT
1. Type of Well: Oil Well Gas Well X Other Injector			8. Well Number 139	
2. Name of Operator CHEVRON U.S.A. INC			9. OGRID Number	
3. Address of Operator	X			10. Pool name or Wildcat
15 SMITH ROAD MIDLAND, T. 4. Well Location	X 79705	R	ECEIVED	VACUUM GRAYBURG SAN ANDRES
Unit Letter_ P_:_ 85 _feet from the _SOUTH _ line and _958 _feet from the _EAST _line				
Section 36 Township 17-S Range 34-E NMPM County LEA				
	11. Elevation (Show wh		RKB, RT, GR, etc.	
	3986' GL			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
NOTICE OF IN	TENTION TO:		l Sub	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WORK ☐ ALTERING CASING				
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE DR	_
PULL OR ALTER CASING DOWNHOLE COMMINGLE	MULTIPLE COMPL		CASING/CEMEN	T JOB L
CLOSED-LOOP SYSTEM		_		
OTHER:			OTHER: ANNUA	AL MIT TEST
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.				
CHEVRON U.S.A. INC HAS CONDUCTED THE ANNUAL MIT TEST ON THE ABOVE WELL.				
CHART ATTACHED.				
PLEASE NOTE THIS TEST IS FOR UIC ANNUAL TESTING				
•				
Spud Date:	Rig J	Release Da	nte:	
<u> </u>			<u></u>	
I heraby contifue that the information	shave is two and comple	to to the h	ast of my knowledg	and haliaf
I hereby certify that the information above is true and complete to the best of my knowledge and belief.				
SIGNATURE SIGNATURE TITLE REGULATORY ASSISTANT DATE 18 JUNE 2014				
Type or print name: Adriann Garcia E-mail address: Adriann.Garcia@chevron.com PHONE: 432-687-7617				
For State Use Only	7			
APPROVED BY:	manah TITI	_{.E} వ్	taf Wana	DATE 6/20/2014
Conditions of Approval (if any):				WIN 26 2014



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