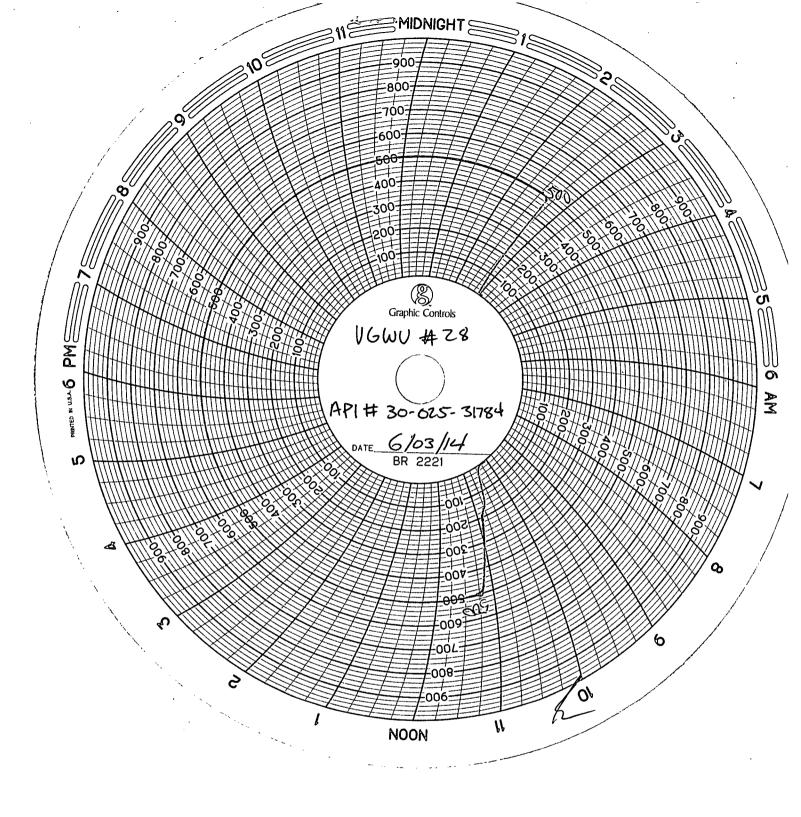
Submit 1 Copy To Appropriate District State of New Mexico Form C-103 Office Revised July 18, 2013 Energy, Minerals and Natural Resources District I - (575) 393-6161 WELL API NO. 1625 N. French Dr., Hobbs, NM 88240 District II - (575) 748-1283 3002531784 OIL CONSERVATION DIVISION 811 S. First St., Artesia, NM 88210 District III - (505) 334-6178 1220 South St. Francis Dr. 5. Indicate Type of Lease 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 STATE 🖂 FEE District IV - (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 6. State Oil & Gas Lease No. 87505 B-2706 SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUGBACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH VACCUM GLORIETA WEST UNIT 8. Well Number 28 1. Type of Well: Oil Well Gas Well X Other Injector 2. Name of Operator 9 OGRID Number CHEVRON U.S.A. INC 3. Address of Operator 10. Pool name or Wildcat RECEIVED 15 SMITH ROAD MIDLAND, TX 79705 VACUUM GLORIETA 4. Well Location Unit Letter_L _:_ 2304 _feet from the _SOUTH _ line and _1127 _feet from the _WEST _line Township 17-S Range 34-E County LEA Section 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: ALTERING CASING □ PLUG AND ABANDON T PERFORM REMEDIAL WORK □ REMEDIAL WORK TEMPORARILY ABANDON **CHANGE PLANS** \Box COMMENCE DRILLING OPNS.□ P AND A П PULL OR ALTER CASING П MULTIPLE COMPL CASING/CEMENT JOB П DOWNHOLE COMMINGLE П CLOSED-LOOP SYSTEM П OTHER: П OTHER: ANNUAL 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 Release Date: I hereby certify that the information above is true and complete to the best of my knowledge and belief. TITLE REGULATORY ASSISTANT DATE SIGNATURE Type or print name Adriann Garcia E-mail address: Adriann.Garcia@chevron.com PHONE: 432-687-7617 Senamah TITLE Stuff Manager DATE 6/24/2014

JUN 2 6 2014 For State Use Only APPROVED BY: Conditions of Approval (if any):



CHENPON #28 V.G.W.Y #28 Lobo Trucking #1