Submit 3 Copies To Appropriate District	State of New 1			Form C-10	
Office District I	Energy, Minerals and Na	atural Resources	C	Revised March 25, 199	9
1625 N. French Dr., Hobbs, NM 87240		WELL API NO.			
District II 811 South First, Artesia, NM 87210	OIL CONSERVATION DIVISION		30-025-30851		1
District III	2040 South Pacheco		5. Indicate Type of		
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505		STATE X		-
2040 South Pacheco, Santa Fe, NM 87505			6. State Oil & Gas I 857948	Lease No.	
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			7. Lease Name or Unit Agreement Name: Vacuum Grayburg San Andres Unit		
2. Name of Operator	Outo		8. Well No.		1
Chevron U.S.A. Inc.			156		
3. Address of Operator			9. Pool name or Wildcat		
15 Smith Road - Midland, Texas 79705			Vacuum Grayburg San Andres		
4. Well Location]
Unit Letter C:	660 feet from the 1	North line and	1330 feet from	n the <u>West</u> line	,
Section 1	Township 18S	Range 34E	NMPM	County Lea	
The state of the s	10. Elevation (Show wheth			Company of the compan	
11. Check A	Appropriate Box to Indica		Report, or Other	Data	2
NOTICE OF INTI	• • •	· ·	SEQUENT REP		
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK		ALTERING CASING	
TEMPORARILY ABANDON	CHANGE PLANS		ING OPNS.	PLUG AND ABANDONMENT	
PULL OR ALTER CASING	MULTIPLE E	CASING TEST AND CEMENT JOB		ABANDONWENT	
OTHER:	Ε	OTHER: UpGrade			X
12. Describe Proposed or Complete of starting any proposed work). or recompilation.		_	_	_	-
	47 jts 2-7/8" tbg & sub				
	-7/8" prod 1576'. TIH w . FINAL REPORT.	/sub pump. Test rum	n unit for 15 mins	: & shut down. RD.	
Start and pulp	. PIWE RECOVE.			213 10 15 70	
			(8)	A TO TO	

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				Hobbs A?/ − 	
				VI C.O.	
I hereby certify that the information above	is true and complete to the best	of my knowledge and belie	f.		•
Land Ch	•				
SIGNATURE () (MA) SR	MINING TI	TLE Regulatory Spec	<u>ialist</u> D	ATE <u>07-10-03</u>	•
Type or print name Laura Skinner			Telephoi	ne No. 432-687-7355	•
(This space for State use)	OC FIEU	D REPRESENTATIVE IV	STAFF MANAGER		
APPROVED BY Jame W. L.		ITLE		ATHU	
Conditions of approval, frany:				ATT JUL 1 5 2003	•