

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

Form C-103  
 Revised July 18, 2013

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

|   |   |
|---|---|
| WELL API NO.<br>30-025-02256  | ✓ |
| 5. Indicate Type of Lease<br>STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> | ✓ |
| 6. State Oil & Gas Lease No.  |   |
| 7. Lease Name or Unit Agreement Name<br>VACUUM GRAYBURG SAN ANDRES UNIT                             | ✓ |
| 8. Well Number 25   | ✓ |
| 9. OGRID Number 4323  | ✓ |
| 10. Pool name or Wildcat<br>VACUUM GRAYBURG SAN ANDRES  | ✓ |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)<br>4,006' (GL)                                   |   |

**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  **HOBBS OCD** ✓

2. Name of Operator  
CHEVRON U.S.A. INC. **NOV 16 2016**

3. Address of Operator  
6301 DEAUVILLE BLVD, MIDLAND, TX 79706 **RECEIVED** ✓

4. Well Location  
 Unit Letter L : 1980 feet from the SOUTH line and 660 feet from the WEST line ✓  
 Section 1 Township 18-S Range 34-E NMPM County LEA

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

|   |   |  |  |
|---|---|--|--|
| <b>NOTICE OF INTENTION TO:</b>                            |   | <b>SUBSEQUENT REPORT OF:</b>                     |  |
| PERFORM REMEDIAL WORK <input checked="" type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/>           | ALTERING CASING <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/>              | CHANGE PLANS <input type="checkbox"/>     | COMMENCE DRILLING OPNS. <input type="checkbox"/> | P AND A <input type="checkbox"/>         |
| PULL OR ALTER CASING <input type="checkbox"/>             | MULTIPLE COMPL <input type="checkbox"/>   | CASING/CEMENT JOB <input type="checkbox"/>       |  |
| DOWNHOLE COMMINGLE <input type="checkbox"/>               |   |  |  |
| CLOSED-LOOP SYSTEM <input type="checkbox"/>               |   |  |  |
| OTHER: <input type="checkbox"/>                           | MIT REPAIR <input type="checkbox"/>       | OTHER: <input type="checkbox"/>                  |  |

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.

Proposed operations are to pump cement into the surface casing annulus after establishing rate, with enough volume to fill to the shoe at 1593' with 50% excess and hesitate in. We will then return the well to production after the repair and continue to monitor the surface casing.

*C.O.A. Submit Wellbore Diagram mst*

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 *Michael Stewart* TITLE Production Engineer DATE 11/15/16

Type or print name Michael Stewart E-mail address: michael.stewart@chevron.com PHONE: 432-687-7431

**For State Use Only**  
 APPROVED BY: *Maury Brown* TITLE Dist Supervisor DATE 11/16/2016  
 Conditions of Approval (if any):

*mw*