

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

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

MAY 31 2017

RECEIVED

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.)		WELL API NO. 30-025-25802
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other INJECTOR		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator CHEVRON USA INC		6. State Oil & Gas Lease No.
3. Address of Operator 1616 W. BENDER BLVD HOBBS, NM 88240		7. Lease Name or Unit Agreement Name CENTRAL VACUUM UNIT
4. Well Location Unit Letter <u>N</u> : <u>400</u> feet from the <u>SOUTH</u> line and <u>2380</u> feet from the <u>WEST</u> line Section <u>06</u> Township <u>18S</u> Range <u>35E</u> NMPM County <u>LEA</u>		8. Well Number <u>121</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4050' GL		9. OGRID Number 4323
		10. Pool name or Wildcat VACUUM;GRAYBURG SA

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

NOTICE OF INTENTION TO: 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: <input type="checkbox"/>		SUBSEQUENT REPORT OF: 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: RETURN WELL TO INJECTION <input checked="" type="checkbox"/>	
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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.

CHEVRON USA INC. IS RESPECTFULLY REQUESTING TO RETURN WELL TO INJECTION.

05/31/2016 TEST CASING TO 570 PSI FOR 30 MINUTES. ORIGINAL CHART WAS SUBMITTED TO NMOCD 06/15/2016. THE CVU #121 WAS RETURNED TO INJECTION FROM PREVIOUSLY BEING IN TA STATUS WITH EQUIPMENT IN THE HOLE AFTER MIT TEST RUN THE FLOWLINE WAS RECONNECTED AT THE WELLHEAD AND INJECTION HEADER. THE WELL IS ACTIVE AND INJECTING WATER.

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 Cindy Herrera-Murillo TITLE PERMITTING SPECIALIST DATE 05/30/2017

Type or print name CINDY HERRERA-MURILLO E-mail address: Cherreramurillo@chevron.com PHONE: 575-263-0431

For State Use Only

APPROVED BY: Mary Brown TITLE AO/II DATE 6/12/2017
 Conditions of Approval (if any):

Accepted for Record Only

RBDMS SHOWS WELL TO BE "ACTIVE."