

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

June 5 Form C-103
Revised July 18, 2013

HOBBS OCD
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505
JUN 16 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. 3002524316
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator CHEVRON U.S.A.		6. State Oil & Gas Lease No. B-1189-1
3. Address of Operator 6301 DEAUVILLE BLVD MIDLAND, TX 79706		7. Lease Name or Unit Agreement Name VACUUM GRAYBURG SAN ANDRES U
4. Well Location Unit Letter_I_: 1400 feet from the _S_ line and 10 feet from the _E_ line Section 2 - Township 18-S Range 34-E NMPM County LEA		8. Well Number 17
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4008'DF		9. OGRID Number 4323
10. Pool name or Wildcat VACUUM GRAYBURG SAN ANDRES		

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK <input 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"/>		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:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE: *Adriann Garcia* TITLE: **REGULATORY ASSISTANT** DATE: June 8, 2017

Type or print name: **Adriann Garcia** E-mail address: **Adriann.Garcia@chevron.com** PHONE: **432-687-7617**

For State Use Only

APPROVED BY: *Key Palma* TITLE: *Compliance Officer* DATE: *6-7-17*
Conditions of Approval (if any):

