

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
HOBBS OCD
 1220 S. St. Francis Dr.,
 Santa Fe, NM 87505
OCT 27 2017

WELL API NO. 3002525710
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR RE-DRILL OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) RECEIVED	
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	7. Lease Name or Unit Agreement Name CENTRAL VACUUM UNIT
2. Name of Operator CHEVRON U.S.A.	8. Well Number 99
3. Address of Operator 6301 DEAUVILLE BLVD MIDLAND, TX 79706	9. OGRID Number 4323
4. Well Location Unit Letter E ; 1408 feet from the N line and 1211 feet from the W line Section 6 - Township 18-S Range 35-E NMPM County LEA	10. Pool name or Wildcat VACUUM GRAYBURG SA
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3463	

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 AN 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: October 24, 2017

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

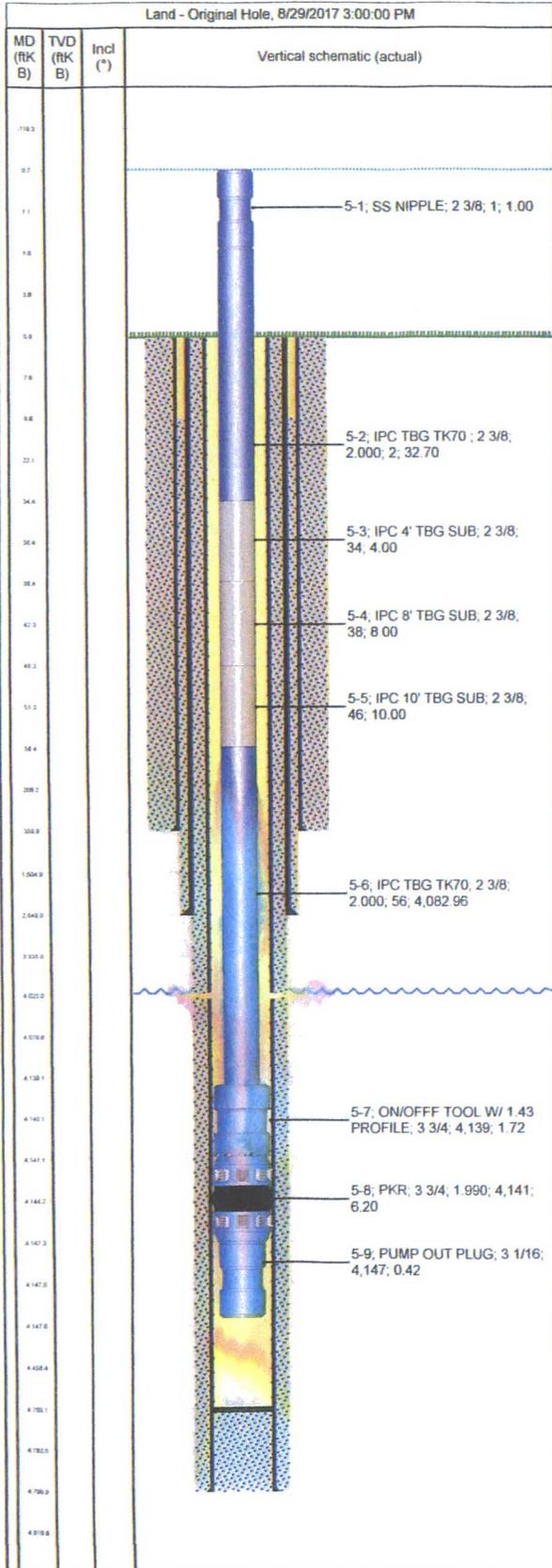
For State Use Only

APPROVED BY: *Kerry Fortner* TITLE *Compliance Officer* DATE *10-27-17*
 Conditions of Approval (any):



Tubing Summary

Well Name CENTRAL VACUUM UNIT 099	Lease Central Vacuum Unit	Field Name Vacuum	Business Unit Mid-Continent	
Ground Elevation (ft) 3,975.00	Original RKB Elevation (ft) 3,981.00	Current RKB Elevation	Mud Line Elevation (ft)	Water Depth (ft)
Current KB to Ground (ft)	Current KB to Mud Line (ft)	Current KB to Csg Flange (ft)	Current KB to Tubing Head (ft)	



Tubing Strings									
Tubing Description		Planned Run?		Set Depth (MD) (ftKB)			Set Depth (TVD) (ftKB)		
Tubing		N		4,147.6					
Run Date		Run Job		Pull Date			Pull Job		
8/29/2017		Mechanical Integrity Test, 8/25/2017 00:00							
Jts	Item Des	OD (in)	ID (in)	Wt (lb/ft)	Grade	Top Thread	Len (ft)	Top (ftKB)	Btm (ftKB)
	SS NIPPLE	2 3/8					1.00	0.6	1.6
1	IPC TBG TK70	2 3/8	2.000	4.70	J-55		32.70	1.6	34.3
	IPC 4' TBG SUB	2 3/8					4.00	34.3	38.3
	IPC 8' TBG SUB	2 3/8					8.00	38.3	46.3
	IPC 10' TBG SUB	2 3/8					10.00	46.3	56.3
128	IPC TBG TK70	2 3/8	2.000	4.70	J-55		4,082.96	56.3	4,139.3
	ON/OFF TOOL W/ 1.43 PROFILE	3 3/4					1.72	4,139.3	4,141.0
	PKR	3 3/4	1.990				6.20	4,141.0	4,147.2
	PUMP OUT PLUG	3 1/16					0.42	4,147.2	4,147.6

Rod Strings							
Rod Description		Planned Run?		Set Depth (ftKB)		Set Depth (TVD) (ftKB)	
Run Date		Run Job		Pull Date		Pull Job	

Rod Components							
Jts	Item Des	OD (in)	Grade	Model	Len (ft)	Top (ftKB)	Btm (ftKB)

Injection Well – High Casing Pressure FAILURE REPORT

Well Name: CUU 099 Well Type: Water WAG
WBS #: UWDCP-R7142-Exp Workover Rep: Bruce Ward Rig: MESA #220

Date Shut-In: _____ Date Repaired: _____

Tubing Pulled – Include pictures of any corrosion or failure

Type: Plastic Lined (Circle One: TK15, TK70, TK99) Fiber Lined

Visible Hole/Failure: Yes No

External Corrosion: Yes No

Coupling Condition: Good

Pin Condition: _____

Comments: _____

Packer Pulled – Include pictures of any wear, corrosion, or failure

Type: 4 1/2 AS 1x

Leaking: Yes No Unknown

Seal Area: Good Washed

O Rings (if applicable) Good Bad

Mandrel Condition: Good Bad

Comments: _____

On/Off Tool Pulled – Include pictures of any wear, corrosion, or failure

Type: T 2

Seal Condition: _____

Other Comments: _____

Casing Evaluation

Leaks: Yes No (If Yes) Depth(s) _____

Casing Inspection Log Run: Yes No

(if Yes) Describe Condition of abnormalities: _____

Wellhead

Comments / Issues: _____

+++++

Tubing Run: Type 2 3/8 J55 Color _____

On/Off Tool Run: _____

Packer Run: Type AS 1x New Redress

Can "Root-cause" of Failure be easily identified? NO LEAKS

Yes No

If Yes:

Tubing leak _____ ft. Depth in Connection Body

Casing Leak _____ ft. Depth