

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

HOBBS OGD
RECEIVED
JUN 22 2018

WELL API NO. 3002530846	-
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	-
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name VACUUM GRAYBURG SA UNIT	-
8. Well Number 146	-
9. OGRID Number 4323	-
10. Pool name or Wildcat VACUUM GRAYBURG SA	
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	

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 INJ -

2. Name of Operator
CHEVRON U.S.A.

3. Address of Operator
8301 DEAUVILLE BLVD MIDLAND, TX 79706

4. Well Location
 Unit Letter B: 1325 feet from the NORTH line and 1980 feet from the EAST line
 Section 2 Township 18 S Range 34E NMPM County LEA

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

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

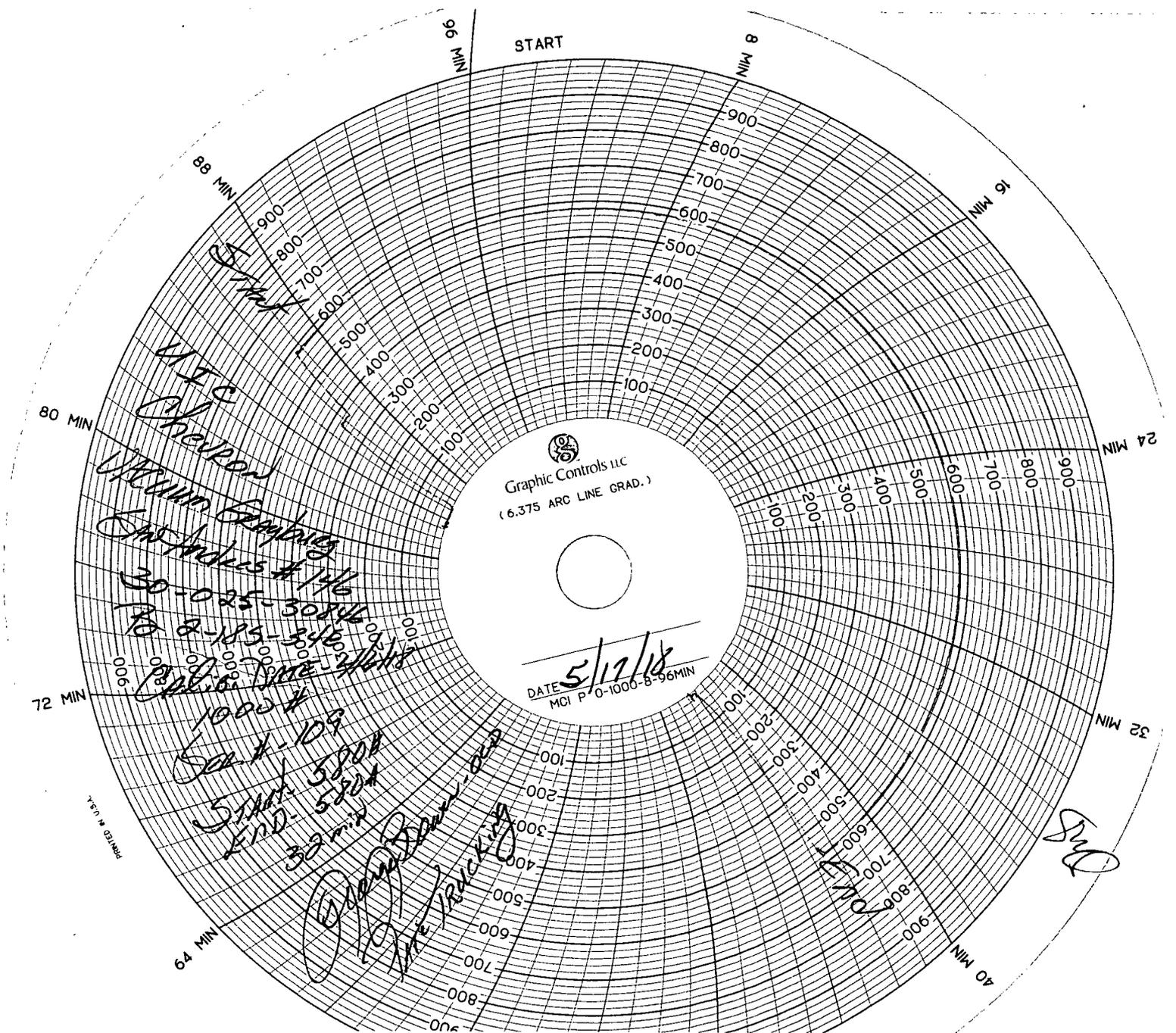
I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE: _____ TITLE: REGULATORY ASSISTANT DATE: 6/19/2018

Type or print name: Jessica Jones E-mail address: jjzi@chevron.com PHONE: 432-687-7575

For State Use Only

APPROVED BY: *Jessica Jones* TITLE: *Compliance Officer Supervisor* DATE: *6/25/12*
 Conditions of Approval (if any):



START

Graphic Controls LLC
(6.375 ARC LINE GRAD.)

DATE 5/17/18
MCI P 0-1000-8-96MIN

MADE IN U.S.A.

64 MIN

72 MIN

80 MIN

88 MIN

96 MIN

8 MIN

16 MIN

24 MIN

32 MIN

40 MIN

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MFC

Chevron

Ultimum Sampling

One Analysis # 146

30-025-30846

70-2-185-3016

Cal. 6. Time 30 min

1000 #

See # 109

Start 5800

End 5800

30 min

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