

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. 30-025-32338
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 Glorieta West Unit
8. Well Number: 133
9. OGRID Number: 4323
10. Pool name or Wildcat: Vacuum Glorieta

MAY 03 2019  
 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.)

1. Type of Well: Oil Well  Gas Well  Other:

2. Name of Operator:  
Chevron U.S.A. Inc.

3. Address of Operator:  
6301 Deauville Blvd, Midland, TX. 79706

4. Well Location  
 Unit Letter O : 355 feet from the South line and 1875 feet from the East line  
 Section 36 Township 17-S Range 34-E NMPM County Lea

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

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

<b>NOTICE OF INTENTION TO:</b> 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"/>	<b>SUBSEQUENT REPORT OF:</b> 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: TA Status w/ MIT Chart <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.  
 ADD YOUR COMMENTS HERE

Current TA expires on 5/5/2019.

This Approval of TA EXPIRES: 5-1-20  
**FINAL TA STATUS EXTENSION -**  
 Well needs to be PLUGGED or RETURNED to PRODUCTION  
 BY THE DATE STATED ABOVE: X 7

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 Zach Wood TITLE Production Specialist - Subsurface DATE 05/01/19

Type or print name Zach Wood E-mail address: woo2@chevron.com PHONE: 575-631-9475  
**For State Use Only**

APPROVED BY: Kerry Foster TITLE Compliance Officer A DATE 5-7-19  
 Conditions of Approval (if any):



District 1  
 1625 N. French Dr., Hobbs, NM 88240  
 Phone: (575) 393-6161 Fax: (575) 393-0720

OCD  
 MAY 03 2019  
**RECEIVED**

State of New Mexico  
 Energy, Minerals and Natural Resources Department  
 Oil Conservation Division Hobbs District Office

**BRADENHEAD TEST REPORT**

Operator Name <b>Chevron USA</b>	API Number <b>30-025-32338</b>
Property Name <b>Vacuum Glorieta West Unit</b>	Well No. <b>133</b>

2. Surface Location

UL - Lot	Section	Township	Range	Feet from	N/S Line	Feet From	E/W Line	County
0	36	17S	34E	355	S	1875	E	Lea

Well Status

TA'D Well	SHUT-IN	INJECTOR	PRODUCER	DATE
<input checked="" type="radio"/> YES    NO	<input checked="" type="radio"/> YES    NO	INJ        SWD	<input checked="" type="radio"/> OIL        GAS	5-1-19

**OBSERVED DATA**

	(A)Surf-Interm	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	0	—	—	0	0
<b>Flow Characteristics</b>					
Puff	Y/N	Y/N	Y/N	<input checked="" type="radio"/> Y    N	CO2 _____
Steady Flow	Y/N	Y/N	Y/N	<input checked="" type="radio"/> Y    N	WTR _____
Surges	Y/N	Y/N	Y/N	<input checked="" type="radio"/> Y    N	GAS _____
Down to nothing	<input checked="" type="radio"/> Y    N	Y/N	Y/N	<input checked="" type="radio"/> Y    N	If applicable type
Gas or Oil	Y/N	Y/N	Y/N	<input checked="" type="radio"/> Y    N	fluid injected for
Water	Y/N	Y/N	Y/N	<input checked="" type="radio"/> Y    N	Waterflood

Remarks: Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

T/A Extension

Signature: <i>Zach Wood</i>	<b>OIL CONSERVATION DIVISION</b>
Printed name: <b>Zach Wood</b>	Entered into RBDMS
Title: <b>PSS</b>	Re-test
E-mail Address: <b>Woodz@chevron.com</b>	<i>[Signature]</i>
Date: <b>5-1-19</b>	Phone: <b>575-631-9475</b>
Witness:	