

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
 NOV 04 2019

WELL API NO. 30-025-27966
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 CENTRAL VACUUM UNIT
8. Well Number 156
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 INJECTOR

2. Name of Operator
CHEVRON USA INC

3. Address of Operator
1616 W. BENDER BLVD HOBBS, NM 88240

4. Well Location
 Unit Letter K : 2340 feet from the SOUTH line and 1330 feet from the WEST line
 Section 25 Township 17S Range 34E NMPM County LEA

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

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: TA STATUS W/ CHART <input checked="" type="checkbox"/>	

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 TEMPORARILY ABANDON THE ABOVE WELL.

10/31/2019 TEST CASING TO 540 PSI FOR 32 MINUTES. WITNESSED BY KERRY FORTNER/NMOCD.ORIGINAL CHART AND A COPY ARE ATTACHED.

WELL IS TEMPORARILY ABANDONED

FINAL TA STATUS- EXTENSION

Approval of TA EXPIRES: 11/29/22
 Well needs to be PLUGGED OR RETURNED
 to PRODUCTION
 BY THE DATE STATED ABOVE: X F

Spud Date:

Rig

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 11/4/2019

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

APPROVED BY: Kerry Fortner TITLE C. O. A DATE 11-4-19
 Conditions of Approval (if any) X

End

End 32 min
Kerry Fortner-000
START 540#
End 540#

1600# 6000
CAL 5-2-19
SER# 8067

PATE Trucking

K 25-17-5-34-E

30-025-27966

CUR # 156

CLARENCE WSH

TH STATUS TEST

PR

START

10-3219

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

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

BRADENHEAD TEST REPORT

Operator Name Chevron USA INC		API Number 30-025-27966	
Property Name CVU		Well No. 156	

7. Surface Location

UL - Lot	Section	Township	Range	Feet from	N/S Line	Feet From	E/W Line	County
10	25	17S	34-E	2340	S	1330	W	LEA

Well Status

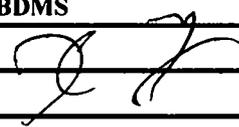
TA'D Well	SHUT-IN	INJECTOR	PRODUCER	DATE
<input checked="" type="checkbox"/> YES NO	<input checked="" type="checkbox"/> YES NO	<input checked="" type="checkbox"/> INJ SWD	OIL GAS	10-31-19

OBSERVED DATA

	(A)Surf-Interm	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	0	NA	NA	0	0
Flow Characteristics					TA
Puff	Y/N	Y/N	Y/N	Y/N	CO2 _____
Steady Flow	Y/N	Y/N	Y/N	Y/N	WTR _____
Surges	Y/N	Y/N	Y/N	Y/N	GAS _____
Down to nothing	Y/N	Y/N	Y/N	Y/N	If applicable type
Gas or Oil	Y/N	Y/N	Y/N	Y/N	fluid injected for
Water	Y/N	Y/N	Y/N	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.

PATE Tracking TA STATUS TEST
Ser# 8067
Cal 5-2-19
START 540#
END 540#

Signature: 	OIL CONSERVATION DIVISION
Printed name: Keloy Carmore	Entered into RBDMS
Title: FSA	Re-test 
E-mail Address: kcarmore@chevron.com	
Date: 10-31-19	Phone: 575-200-6265
Witness: Kerry Fortner - OGD	

399-3221