

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. 30-025-25816
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 28
9. OGRID Number 4323
10. Pool name or Wildcat VACUUM GRAYBURG SAN ANDRES

**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  
6301 DEAUVILLE BLVD, MIDLAND, TEXAS 79706

4. Well Location  
 Unit Letter P: 1230 feet from the SOUTH line and 39 feet from the EAST line  
 Section 25 Township 17S Range 34E NMPM County LEA

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

**HOBBS OCD**

MAY 07 2020

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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
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: Repair with MIT 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 HAS REPAIRED THE ABOVE WELL. THIS WELL HAS FAILED A MIT TEST. THE PACKER WAS REPLACED AND WELLBORE IS READY TO RESTART INJECTION.  
 03/10/2020 TEST CASING TO 580 PSI FOR 32 MINUTES. TEST GOOD. WITNESSED BY GARY ROBINSON/NMOCD  
 PLEASE FIND ATTACHED MIT CHART AND A COPY OF BRADENHEAD TEST.

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 Cindy Herrera-Murillo TITLE Permitting Specialist DATE 05/06/2020

Type or print name Cindy Herrera-Murillo E-mail address: eeof@chevron.com PHONE: 575-263-0431

APPROVED BY: Kerry Fat TITLE CO DATE 5-8-20

Conditions of Approval (if any)

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

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

**BRADENHEAD TEST REPORT**

Operator Name <b>Chevron USA Inc.</b>		API Number <b>30-025-25814</b>
Property Name <b>CENTRAL VACUUM UNIT</b>		Well No. <b>#028</b>

7. Surface Location

UL - Lot <b>P</b>	Section <b>25</b>	Township <b>17S</b>	Range <b>34E</b>	Feet from <b>1230</b>	N/S Line <b>FSL</b>	Feet From <b>159</b>	E/W Line <b>FEL</b>	County <b>LEA</b>
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Well Status

TA'D Well <b>YES</b> <input type="radio"/> <b>NO</b> <input checked="" type="radio"/>	SHUT-IN <b>YES</b> <input type="radio"/> <b>NO</b> <input checked="" type="radio"/>	INJECTOR <b>INJ</b> <input checked="" type="radio"/> <b>SWD</b> <input type="radio"/>	PRODUCER <b>OIL</b> <input type="radio"/> <b>GAS</b> <input type="radio"/>	DATE <b>3-10-20</b>
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OBSERVED DATA

	(A)Surf-Interm	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<b>0</b>	<b>0</b>		<b>125</b>	<b>1700</b>
<u>Flow Characteristics</u>					
Puff	<b>Y/N</b> <input checked="" type="radio"/>	CO2 _____			
Steady Flow	<b>Y/N</b> <input checked="" type="radio"/>	WTR _____			
Surges	<b>Y/N</b> <input checked="" type="radio"/>	GAS _____			
Down to nothing	<b>Y/N</b> <input checked="" type="radio"/>	If applicable type			
Gas or Oil	<b>Y/N</b> <input checked="" type="radio"/>	fluid injected for			
Water	<b>Y/N</b> <input checked="" type="radio"/>	Waterflood			

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

**MIT-**  
 Prod. csg. blew to zero into truck w/ slight fluid  
 in 4 min. *de*

Signature: <i>[Signature]</i>	<b>OIL CONSERVATION DIVISION</b>
Printed name: <b>Eloy Carmora</b>	Entered into RBDMS <i>[Signature]</i>
Title: <b>SEPS</b>	Re-test
E-mail Address: <b>E.Carmora@Chevron.com</b>	
Date: <b>3-10-2020</b>	Phone: <b>575-200-76265</b>
Witness: <i>[Signature]</i>	

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MAY 07 2020

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