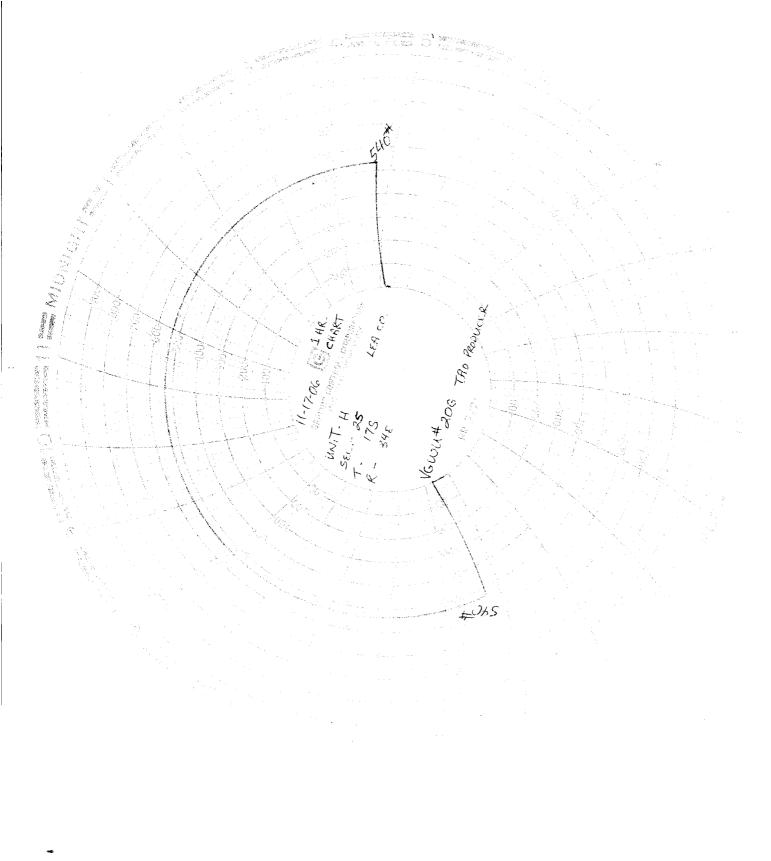
## Submit 3 copies to Appropriate

## State of New Mexico 1 Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

DEC 0 7 2005 DeSolo/Nichols 12-93 ver 1.0

District Office			I/GAI36	tu 1-1-03
<u>DISTRICT I</u>	OIL CONSERVA	ATION DIVISION	WELL API NO.	
P.O. Box 1980, Hobbs, NM 88240			30-025-31807	
P.O. Box 2088 <u>DISTRICT II</u> P.O. Box 2088  Santa Fe, New Mexico 87504-2088			5. Indicate Type of Lease	
P.O. Box Drawer DD, Artesia, NM 88210			STATE STATE	FEE 🔲
<u>DISTRICT III</u>			6. State Oil / Gas Lease No.	
1000 Rio Brazos Rd., Aztec, NM 87410				
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMI (FORM C-101) FOR SUCH PROPOSALS.			7. Lease Name or Unit Agreement Name VACUUM GLORIETA WEST UNIT	
1. Type of Well: OIL GAS WELL WEL	L OTHER			
Name of Operator     CHEVRON USA INC			8. Well No. 20	
3. Address of Operator 15 SMITH RD, MIDLAND, TX 79705			9. Pool Name or Wildcat VACUUM GLORIETA	
4. Well Location			-	
Unit Letter H:	1541' Feet From The	NORTH Line and 181'	Feet From The EAST Line	
Section 25	Township 17-S	Range <u>34-E</u> NM	IPM <u>LEA</u> COUNTY	
<b>L</b> et W	10. Elevation (Show whether D	DF, RKB, RT,GR, etc.) 3994' GR		14 B
11. Check A	ppropriate Box to Indica	te Nature of Notice, Report,	, or Other Data	
NOTICE OF INTENTIO	ON TO:	SI	JBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING	
	CHANGE PLANS	COMMENCE DRILLING OPE		
TEMPORARILY ABANDON	CHANGE FLANS	_		LJ
PULL OR ALTER CASING		CASING TEST AND CEMEN		
OTHER:		_ U OTHER:	CHART TO TA	
11-13-06: REL TBG. UNSET PUMP. 11-14-06: SWABBING. 11-15-06: MIRU REVERSE UNIT. TOH 11-16-06: TIH W/RBP & 191 JTS TBG. 11-17-06: CHART TEST CSG TO 540# WELL IS TEMPORARILY ABANDONED	SET PLUG @ 5921'. FOR 35 MINS. (ORIGINAL (	CHART & COPY OF CHART ATT.	ACHED).	
This Approval of Tempa Abandonment Expires	orary III/7	202122232425262720 2020	293031	
I hereby certify that the information above is true and complete	on the best of my knowledge and belief.			*****
SIGNATURE / WISE	MASSE TOWNITLE	Regulatory Specialist	DATE11/29/2006	3
TYPE OR PRINT NAME DO	enise Pinkerton		Telephone No. 432-68	7-7375
(This space for State Use)	nb.	FIELD REPRESENTATIVE II/	STAFF MANAGER	
CONDITIONS OF APPROVAL, IF ANY:	TITLE OC	FIELD REPRESERVE	DATE DEC 0 7 20	06



PACKEL MANNE VUWARDS

PACKET STATE

PROKET STATE

PERFORMATIONS

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