| Submit 3 Copies To Appropriate District | | ew Mexico | | | | Fo | rm C -103 | |
|---|---|---------------------------------|---------------------------|-------------|--|----------------------|-------------------|--|
| Office District I | Energy, Minerals and | d Natural R | esources | | | Revised Ma | rch 25, 1999 | |
| 1625 N. French Dr., Hobbs, NM 87240 | | | | WELL A | | 225 | | |
| District II 811 South First, Artesia, NM 87210 | OIL CONSERVATION DIVISION | | | | 30-025-33335 5. Indicate Type of Lease | | | |
| <u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410 | 2040 South Pacheco | | | | STATE X FEE | | | |
| District IV | | | | <u> </u> | | | | |
| 2040 South Pacheco, Santa Fe, NM 87505 | \$ | | | 0. State 6 | Oil & Gas Lea -1 | ase No. | | |
| 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.) | | | | | 7. Lease Name or Unit Agreement Name: Central Vacuum Unit | | | |
| 1. Type of Well: Oil Well X Gas Well Other | | | | | | | | |
| 2. Name of Operator | | | | 8. Well N | Vo. | | | |
| Chevron U.S.A. Inc. | | | | 168 | | | | |
| 3. Address of Operator | | | | | 9. Pool name or Wildcat | | | |
| 15 Smith Road - Midland, Tex 4. Well Location | <u>kas 79705</u> | , | | Vacuum 0 | Brayburg Sar | n Andres | | |
| Unit LetterF | 2068 feet from the | North | line and | 1467 | _ feet from th | ne <u>West</u> | line | |
| Section 36 | Township 17 | 7-s Rang | ge 34-E | NMPM | C | County | Lea | |
| | 10. Elevation (Show w. | hether DR, I 4003 ' 6 | | tc.) | | | | |
| 11. Check | Appropriate Box to Inc | dicate _l Nat | ure of Notice | , Report, o | or Other Da | ıta | | |
| NOTICE OF IN | • • • | | | | NT REPO | | | |
| PERFORM REMEDIAL WORK | PLUG AND ABANDON | REN | IEDIAL WORK | | | ALTERING C | ASING | |
| TEMPORARILY ABANDON | CHANGE PLANS | | MMENCE DRILL | | | PLUG AND ABANDONM | ENT | |
| PULL OR ALTER CASING L | MULTIPLE COMPLETION | | SING TEST AND MENT JOB |) | | | | |
| OTHER: | | □ отн | ER: Wire Lir | e Lost In | Tbg. | | x | |
| Describe Proposed or Comple of starting any proposed work or recompilation. | | | | | | | | |
| _ | kr @ 4243' & TOH w/2-7/ | /8" prod tl | og; had slick | line tool | l; lay down | 2 jts w/t | cols | |
| | vacuum. TOH w/16 jts 2 | | | | | | i | |
| 08-08-03 TOH w/128 jts | tings out of tbg; csg w s 2-7/8" prod tbg, SN, | pkr. TIH | w/129 jts 2- | 7/8" prod | | | ækr | |
| | Chart & test csg to 55 flowed back 250 bbls i | | _ | | er. 🥳 | -0 | | |
| Out with a 1 about 11/2 | **11 | | | | /£ÿ | 200 000 | | |
| Original chart w/copy at | ttached. | | | | (52021) | 171, 777 | • • | |
| | | | | | 18 | SEP LUUS | • | |
| | | | | | /5° | Ctb 5003 | | |
| | | | | | 1 | V | . 🕓 | |
| I hereby certify that the information abo | eye is true and complete to the | best of my kn | owledge and beli | ef. | 1,0 | UDLELZIV | | |
| Laura | binner) | _ | • | | | | | |
| SIGNATURE CYLLIA SIGNATURE | W/WD0 | _ TITLE_Re | gulatory Spec | cialist | DAT | | 0-03 | |
| Type or print name Laura Skinne | r | | | | Telephone 1 | No. 432-6 | 87-7355 | |
| (This space for State use) | S. War b | pre e | | | F) 4 (T) | - 0 | | |
| APPROVED BY Conditions of approval, if any | OC FIEL | _ TITLE LD REPRESE | NTATIVE II/ST | AFF MANA | DATE | * SEP 1 5 | 2003 - | |
| | · · · · | | | | | | | |

