Submit 3 copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

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Form C-103 Revised 1-1-89

DISTRICT

200711	
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Dist	٦s

Ol	L CONSERVATION DIVISION	WELL API NO.		
P.O. Box 1980, Hobbs, NM 88240 DISTRICT II	P.O. Box 2088	30-025-24019		
P.O. Box Drawer DD, Artesia, NM 88210	Santa Fe, New Mexico 87504-2088	5. Indicate Type of Lease STATE ✓ FEE ☐		
ISTRICT III		6. State Oil / Gas Lease No.		
000 Rio Brazos Rd., Aztec, NM 87410	_	B-4118		
	S 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		
		NORTH VACUUM ABO WEST UNIT		
. Type of Well: OIL GAS WELL WELL	OTHER INJECTION			
2. Name of Operator CHEVRON USA IN	NC	8. Well No.		
3. Address of Operator 15 SMITH RD, MI	DLAND, TX 79705	9. Pool Name or Wildcat VACUUM ABO, NORTH		
4. Well Location				
Unit Letter P: 660 Feet From The SOUTH Line and 660 Feet From The EAST Line				
Section 21 Tov	vnship 17S Range 34E NN	MPM <u>LEA</u> COUNTY		
10.	Elevation (Show whether DF, RKB, RT,GR, etc.) 4058' GL			

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

NOTICE OF IN	TENTIC	ON TO:		SUBSEQUE	NT REPORT OF:	
PERFORM REMEDIAL WORK		PLUG AND ABANDON		REMEDIAL WORK	ALTERING CASING	
TEMPORARILY ABANDON		CHANGE PLANS		COMMENCE DRILLING OPERATION	PLUG AND ABANDONMENT	
PULL OR ALTER CASING			ļ	CASING TEST AND CEMENT JOB		
OTHER:				OTHER: REPAIR SUSPECT	ED PACKER LEAK & TA	

7-02-07: MIRU. LATCH ONTO TBG. WORK TBG. TRY TO REL PKR.

7-03-07: TIH W/GAUGE RING TO 8730. OK. TIH W/CIBP & SET @ 8670'. TEST WELLBORE TO 520#. HELD. SPOT 35' CMT ON TOP OF CIBP.

TIH W/274 JTS TBG TO 8612. CIRC 195 BBLS PKR FLUID.

7-05-07: MIT CHART FOR NMOCD TO 540#. LOST 35# IN 33 MINUTES. (ORIGINAL CHART & COPY OF CHART ATTACHED).

RIG DOWN. FINAL REPORT.

WELL IS TEMPORARILY ABANDONED.

This Approval of Temporary Abandonment Expires



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Thereby certify that the information above is true and complete to the best of my knowledge and belief SIGNATURE Regulatory Specific Spe	ecialist DATE 7/17/2007
TYPE OR PRINT NAME Denise Pinkerton	Telephone No. 432-687-7375

^{12.} Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.