

DISTRICT I

P O Box 1980, Hobbs, NM 88240

DISTRICT II

P.O. Box Drawer DD, Artesia, NM 88210

DISTRICT III

1000 Rio Brazos Rd., Aztec, NM 87410

**OIL CONSERVATION DIVISION**

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

WELL API NO	30-025-24328
5 Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6 State Oil / Gas Lease No	B-1189-1
7 Lease Name or Unit Agreement Name	VACUUM GRAYBURG SAN ANDRES UNIT
8 Well No	15
9 Pool Name or Wildcat	VACUUM GRAYBURG SAN ANDRES
10 Elevation (Show whether DF, RKB, RT, GR, etc) 4009' GR	

SUNDY 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	
1 Type of Well	OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER INJECTION
2 Name of Operator	CHEVRON USA INC
3 Address of Operator	15 SMITH RD, MIDLAND, TX 79705
4 Well Location	Unit Letter J : 1400 Feet From The SOUTH Line and 2450 Feet From The EAST Line Section 2 Township 18S Range 34E NMPM LEA COUNTY
10 Elevation (Show whether DF, RKB, RT, GR, etc) 4009' GR	

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

**NOTICE OF INTENTION TO:**

**SUBSEQUENT REPORT OF:**

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐  
OTHER ☐

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPERATION ☐ PLUG AND ABANDONMENT ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER ☐ REPAIR ON/OFF TOOL W/CHART ☒

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.

01-02-08. MIRU TEST CSG TO 540# FOR 40 MINS MONITOR TBG NO LOSS.

01-03-08. GOT OFF THE PKR W/ON/OFF TOOL. TOH W/131 JTS 2 3/8" TBG CHANGE OUT ON/OFF TOOL. TIH W/131 JTS CIRC 70 BBW PKR FLUID PRE-TEST CSG TO 540# FOR 30 MINS. GAIN 100# TEST TBG TO 1880# FOR 30 MINS GAIN 80#.

01-04-08 PRE TEST CSG TO 550# FOR MINS NO LOSS. CHART TEST CSG TO 560# FOR 35 MINS LOST 10# RETR BLANKING PLUG. (ORIGINAL CHART & COPY OF CHART ATTACHED).

**RECEIVED**

JAN 18 2008

**HOBBS OCD**

I hereby certify that the information above is true and complete to the best of my knowledge and belief

SIGNATURE Denise Pinkerton TITLE Regulatory Specialist

DATE 1/17/2008

TYPE OR PRINT NAME Denise Pinkerton

Telephone No 432-687-7375

(This space for State Use)

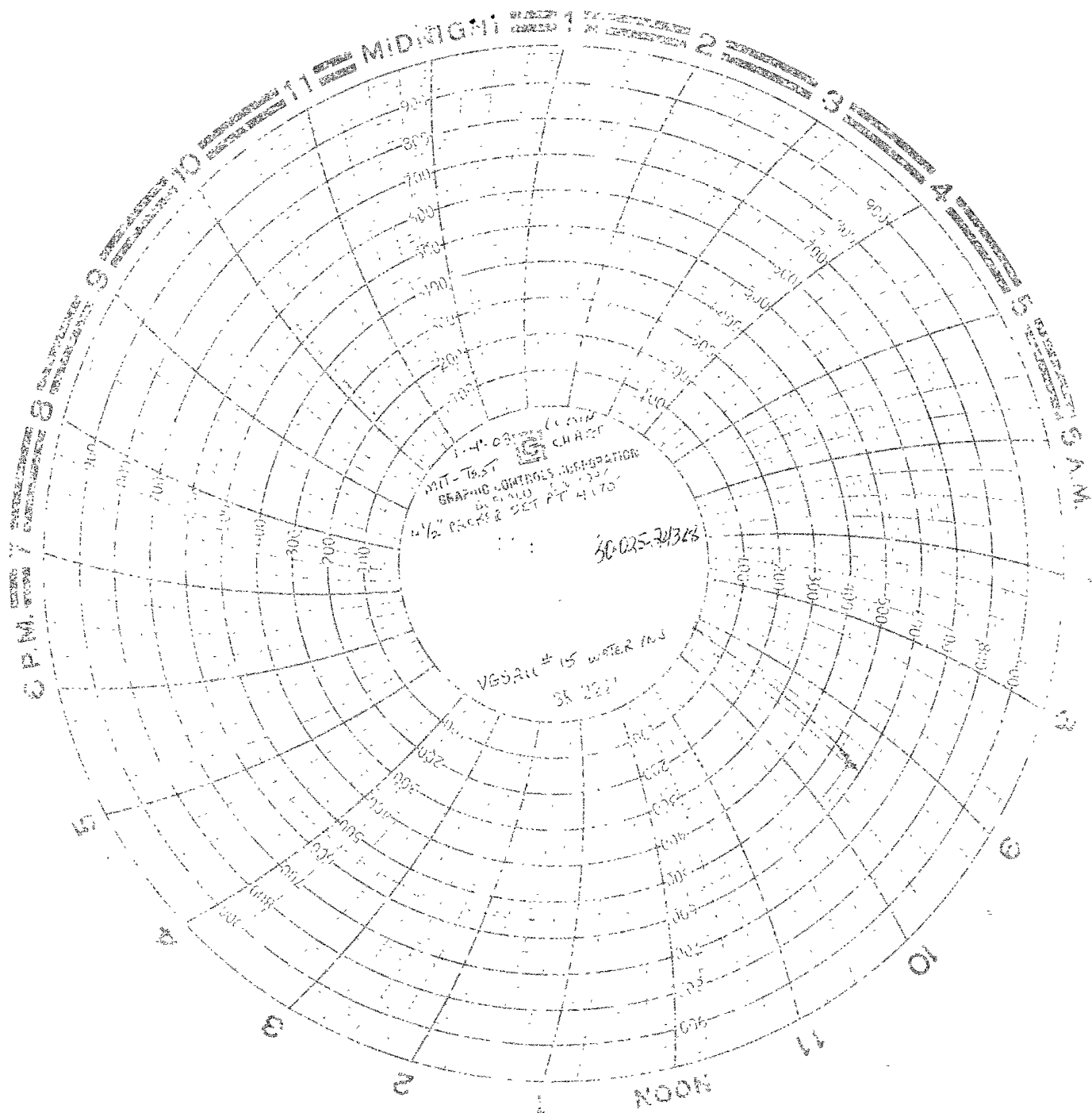
APPROVED

CONDITIONS OF APPROVAL, IF ANY

Chris Williams  
TITLE

OCD DISTRICT SUPERVISOR/GENERAL MANAGER  
DATE

**MAR 18 2008**



DATE 01/04/08

WELL NAME Y6SAU #15 WIW

SUPERVISOR Bobby Hill

PACKER TYPE 1X Nickel Plated Arrow Set 2.3/8" x 4.1/2"

PACKER SETTING DEPTH 4170'

PERFORATIONS 4531'-4751'