Submit 3 Copies To Appropriate District Office	State of New Me		Form C-103
District I 1625 N French Dr , Hobbs, NM 88240	Energy, Minerals and Natu	iral Resources	WELL API NO. May 27, 2004
District II 1301 W Grand Ave , Artesia, NM 88210	OIL CONSERVATION		30-025-25999 5. Indicate Type of Lease
District III 1000 Rio Brazos Rd, Aztec, NM 87410	azos Rd, Aztec, NM 87410 1220 South St. Francis Dr. Santa Fe, NM 87505		STATE FEE 6. State Oil & Gas Lease No.
District IV 1220 S. St. Francis Dr , Santa Fe, NM 87505	Santa 1 0, 1411 0 1	, 303	6. State Off & Gas Lease No.
		UG BACK TO A	7. Lease Name or Unit Agreement Name CENTRAL VACUUM UNIT
1. Type of Well: Oil Well	Gas Well 🗌 Other 🥠 🥠.	/	8. Well Number 138
2. Name of Operator CHEVRON U.S.A. INC.			9. OGRID Number 4323
Address of Operator SMITH ROAD, MIDLAND, TE	XAS 79705		10. Pool name or Wildcat VACUUM GRAYBURG SAN ANDRES
4. Well Location			
Unit Letter P: 10 feet from the SOUTH line and 70 feet from the EAST line Section 36 Township 17-S Range 34-E NMPM County LEA			
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3986' GL			
Pit or Below-grade Tank Application or Closure			
Pit type Depth to Groundwater Distance from nearest fresh water well Distance from nearest surface water			
Pit Liner Thickness: mil Below-Grade Tank: Volume bbls; Construction Material			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORD TEMPORARILY ABANDON CHANGE PLANS COMMENCE DR		SUBS REMEDIAL WORK COMMENCE DRIL CASING/CEMENT	LING OPNS. P AND A
OTHER I		OTHER: TEMPO	PRARILY ABANDON WITH CHART
 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion. TEST CSG TO 560 PSI FOR 30 MINUTES. (ORIGINAL CHART & COPY OF CHART ATTACHED). CIBP SET @ 4192'. 			
WELL IS TEMPORARILY ABANDONED. This Approval of Temporary /27/2013 Abandonment Expires			
I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-			
grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan.			
SIGNATURE TITLE Regulatory Specialist DATE 06-19-2008			
Type or print name Denise Pinkerton E-mail address: <u>leakejd@chevron.com</u> Telephone No. 432-687-7375 For State Use Only			
APPROVED BY: JUN 27 2008 TITLE OC DISTRICT SUPERVISOR/GENERAL MANAGER DATE			
Conditions of Approval (if any):		No. No.	



HOBBS OCL

