

Submit 3 Copies to Appropriate District Office  
District I  
1625 N French Dr., Hobbs, NM 88240  
District II  
1301 W. Grand Ave., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
June 19, 2008

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

WELL API NO. 30-025-21649
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Vacuum Glorieta West Unit <input checked="" type="checkbox"/>
8. Well Number 14 <input checked="" type="checkbox"/>
9. OGRID Number 4323 <input checked="" type="checkbox"/>
10. Pool name or Wildcat Vacuum Glorieta <input checked="" type="checkbox"/>

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.)	
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input checked="" type="checkbox"/>	
2. Name of Operator Chevron U.S.A. Inc. <input checked="" type="checkbox"/>	
3. Address of Operator 15 Smith Road, Midland, TX 79705	
4. Well Location Unit Letter <u>B</u> : <u>800</u> feet from the <u>N</u> line and <u>2310</u> feet from the <u>E</u> line <input checked="" type="checkbox"/> Section <u>25</u> Township <u>17S</u> Range <u>34E</u> NMPM Lea County	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4002 GR	

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

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input checked="" type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETIONS <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> OTHER: <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: <input type="checkbox"/>
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13. 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.

- MIRU; Kill well
  - TOH w rods and pump laying down
  - NDWH; NUBOP
  - TOH w/ tubing scanning
  - PU and RIH w/ RBP, CSG Locator, and tubing
  - Set RBP @ 5750'; 30' above Arrow Set packer (+/- 10') Arrow Set Packer set @ 5781' in casing and open hole packer @ 5914'. Dual packer system for water isolation in horizontal completion)
  - Pretest casing to 500 PSI for 15 minutes. Circulate Packer fluid.
  - TOH LD tubing
  - NDBOP; NUWH w/ B1 3000# flange w/ 2" valve on top w/ pressure gauge installed
  - Perform MIT for NMOCD; 500 PSI for 30 minutes
  - RDMO
- Spud Date:  Rig Release Date:

**Condition of Approval: Notify OCD Hobbs office 24 hours prior to running MIT Test & Chart.**

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

SIGNATURE Wendi Kingston TITLE Regulatory Team Lead DATE 10/27/08

Type or print name Wendi Kingston E-mail address: wendikingston@chevron.com PHONE: 432-687-7826

For State Use Only

APPROVED BY: Wendi Kingston TITLE Regulatory Team Lead DATE 10/27/08  
Conditions of Approval (if any):

OCD FIELD REPRESENTATIVE/STAFF MANAGER

OCT 31 2008