

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103

June 19, 2008

RECEIVED

MAR 04 2009

HOBBS

OIL CONSERVATION DIVISION

220 South St. Francis Dr.

Santa Fe, NM 87505

WELL API NO.

30-025-31808

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

VACUUM GLORIETA WEST UNIT

8. Well Number 67

9. OGRID Number 4323

10. Pool name or Wildcat

VACUUM GLORIETA

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 ☒ Gas Well ☐ Other ☐

2. Name of Operator

CHEVRON U.S.A. INC.

3. Address of Operator

15 SMITH ROAD, MIDLAND, TEXAS 79705

4. Well Location

Unit Letter G: 1435 feet from the NORTH line and 1408 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.)

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
 TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
 PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
 DOWNHOLE COMMINGLE ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
 COMMENCE DRILLING OPNS. ☐ P AND A ☐
 CASING/CEMENT JOB ☐

OTHER:

OTHER: REPAIR & RETEST MIT - w/ chart

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.

2-18-09: MIRU. REL PKR. NOTIFY SYLVIA W/NMOCD. SET PKR @ 5932. REL PKR. TEST TBG TO 500 PSI FOR 15 MINS. NO LEAKS. REPLACE 1 BAD JT. SET PKR. NOTIFY SYLVIA W/NMOCD OF TEST & CHART. SET PKR @ 5932. RUN CHART. TEST CSG TO 500 PSI. NO LEAKS. (ORIGINAL CHART & COPY OF CHART ATTACHED).

Spud Date:

Rig Release Date:

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

SIGNATURE

TITLE REGULATORY SPECIALIST DATE 02-23-2009

Type or print name DENISE PINKERTON E-mail address: leakejd@chevron.com PHONE: 432-687-7375

For State Use

APPROVED BY:

TITLE DISTRICT 1 SUPERVISOR

DATE

MAR 09 2009

Conditions of Approval (if any):

