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Submit 3 Copies To Appropriate District State of New Mexico	Form C-103
Office Energy, Minerals and Natural Resources	Revised March 25, 1999
1625 N. French Dr., Hobbs, NM 87240 District II	WELL API NO. 30-025-35687
811 South First, Artesia, NM 87210 2040 South Division	5. Indicate Type of Lease
District III2040 South Pacheco1000 Rio Brazos Rd., Aztec, NM 87410Santa Fe, NM 87505	STATE 🕱 FEE 🗌
District IV 2040 South Pacheco, Santa Fe, NM 87505	6. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name:
(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.)	Vacuum Grayburg San Andres Unit
1. Type of Well: Oil Well 🕱 Gas Well 🗌 Other	
2. Name of Operator	8. Well No.
Chevron U.S.A. Inc.	211
3. Address of Operator	9. Pool name or Wildcat
15 Smith Road - Midland, Texas 79705 4. Well Location	Vacuum Grayburg San Andres
4. Well Location	
Unit Letter <u>M</u> : 710 feet from the <u>South</u> line and	1280 feet from the West line
Section1Township18sRange34E10. Elevation (Show whether DR, RKB, RT, GR, GR)3995' GL	NMPM County Lea
11. Check Appropriate Box to Indicate Nature of Notice	Report or Other Data
	BSEQUENT REPORT OF:
	LING OPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING MULTIPLE CASING TEST AND COMPLETION	
OTHER: OTHER: Update	on Procedure
<ol> <li>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 recompilation.</li> </ol>	
12-09-03 MIRU. MI frac tank. Pumped 120 bbls mud down csg; csg on vacuum; pumped 20 bbls down tbg.	
TIH w/pkr w/on & off tool, lock set & $3-1/2$ " tbg to 1506.	
12-10-03 Set pkr @ 1536'. Displace 120 bbls pkr fluid; latched onto pkr. Chart & test casing to	
500# (good). Rig Down.	
NOTE: PLA WORK ON THIS WELL IS STILL IN PROGRESS.	
	0112131415767376 13 16 10 10 10 10 10 10 10 10 10 10 10 10 10
Original Chart w/copy attached.	N. Contraction
	8 7 8 2
	60 FL 72 PN
	154 0000 THE 122
	No. Co
I hereby certify that the information above is true and complete to the best of my knowledge and beli	
SIGNATURE Rausa Skimer TITLE Regulatory Spe	cialistDATE01-15-04
Type or print name Laura Skinner	Telephone No. <u>432–687–7355</u>
(This space for State use) OC FIELD REPRESENTATIVE II/STAFF MANAGER	
APPROVED BY Augul Lunk TITLE	D'JAN 2 6 2004
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