Submit 3 Copies To Appropriate District Office	State of New Me		Form C-103 June 19, 2008
District I 1625 N. French Dr , Hobbs, North II 1301 W. Grand Ave , Artesia, NM 88210 District III AIIC 18 90	1000 C41 C4 E	DIVISION	WELL API NO. 30-025-34098  5. Indicate Type of Lease STATE FEE FEE
1000 Rio Brazos Rd , Aztec, NAJG 018 20 District IV 1220 S St Francis Dr., Santa HOBBSO 87505	Sama re, Nivi o	7505	6. State Oil & Gas Lease No.
(DO NOT USE THIS FORM FOR PROPOSALS DIFFERENT RESERVOIR. USE "APPLICATION"		JG BACK TO A	7. Lease Name or Unit Agreement Name STATE "AN"
PROPOSALS.)  1. Type of Well: Oil Well  Gas Well  Other			8. Well Number 12
2. Name of Operator CHEVRON U.S.A. INC.	7		9. OGRID Number 4323
3. Address of Operator 15 SMITH ROAD, MIDLAND, TEXAS	S 79705		10. Pool name or Wildcat VACUUM; WOLFCAMP, EAST
4. Well Location Unit Letter I 1950 feet from	the SOUTH line and 450 fee	et from the EAST li	ine
Section 7 Township	18-S Range 35-E	NMPM	County LEA /
11	. Elevation (Show whether DR,	RKB, RT, GR, etc.)	
NOTICE OF INTENT PERFORM REMEDIAL WORK PL TEMPORARILY ABANDON CH PULL OR ALTER CASING MU DOWNHOLE COMMINGLE  OTHER: INTENT FOR TA EXTENTION 13. Describe proposed or completed of starting any proposed work). or recompletion.	UG AND ABANDON   HANGE PLANS   ULTIPLE COMPL   OPERATION   OPERATI	SUBS REMEDIAL WORK COMMENCE DRIL CASING/CEMENT OTHER: Dertinent details, and le Completions: Atta	SEQUENT REPORT OF:  ALTERING CASING  LING OPNS. PAND A  JOB  give pertinent dates, including estimated date ach wellbore diagram of proposed completion  ATUS IN THE SUBJECT WELL, DUE TO
Spud Date:	Rig Release Da		hours prior to running MIT Test & Charl
SIGNATURE  Type or print name DENISE PINKER  For State Use Only  APPROVED BY:  Conditions of Approval (if any)	TON E-mail address: leake	JLATORY SPECIAI	LIST DATE 08-17-2010 PHONE: 432-687-7375