Submit 1 Copy To Appropriate District Office	State of New Me		Form C-103
District I	Energy, Minerals and Natural Resources		October 13, 2009
1625 N. French Dr., Hobbs, NM 88940			WELL API NO.
District II 1301 W. Grand Ave., Artesia, NM 88210 OIL CONSERVATION DIVISION		30-025-31873	
51 Co. 10			5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 8741011 & 2 (U) Sonto Fo NIM 27505			STATE FEE
District IV 1220 S. St. Francis Dr., Santa Feliobbsucu			6. State Oil & Gas Lease No. B-2317-1-A
87505			. B-2317-1-A
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 Glorieta West Unit
1. Type of Well: Oil Well Gas Well Other Injector			8. Well Number 91
2. Name of Operator			9. OGRID Number
Chevron U. S. A. Inc.			4323 -
3. Address of Operator			10. Pool name or Wildcat
15 Smith Road Midland, Texas 79705		Vacuum Glorieta	
4. Well Location			
Unit Letter I : 1459 feet from the South line and 1048 feet from the East line			
Section 35 Township 17S Range 34E NMPM Lea County			
11. Elevation (Show whether DR, RKB, RT, GR, etc.)			
12. Check Appro	priate Box to Indicate Na	ature of Notice, I	Report or Other Data
			SEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☑ PLUG AND ABANDON ☐ REMEDIAL WORK			-
TEMPORARILY ABANDON		LLING OPNS. P AND A	
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT			TJOB 🔲
DOWNHOLE COMMINGLE			
OTHER:		OTHER:	
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date			
		. For Multiple Con	npletions: Attach wellbore diagram of
proposed completion or recompletion.			
Well has failed the bradenhead test on 11/15/10. Chevron plans to investigate the cause of the leak and restore the mechanical integrity			
of the well.			
Rule 19.15.25.14			
Set CIBP, RBP or Packer within 100 feet of uppermost			
perfs. or open hole. Pressure test to 500 psi for 30 minutes with a pressure drop of not greater than 10% over a			
30 minute period.	ver a	Condition of	of Approval: Notify OCD Hobbs
penou.			ours prior of running MIT Test & Chart
Spud Date:	Rig Release Date	te:	
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I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
Thereby certify that the information above is true with somplete to the bost of the knowledge and benefit.			
SIGNATURE			
The state of the s			
Type or print name Edgar Acero E-mail address: edgar.acero@chevron.com PHONE: 432-687-7343			
For State Use Only			
APPROVED BY Comple TITLE STATE MGZ DATE 3-29-2011			
Conditions of Approval (if any):			
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VGWU WI-91 API No. 30-025-31873

