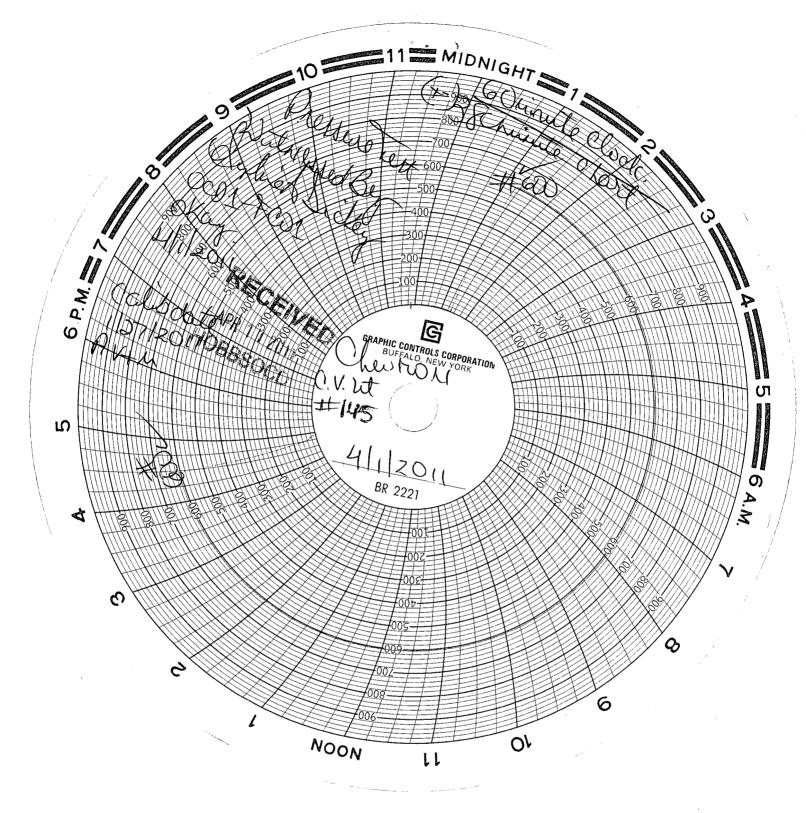
	Submit 1 Copy To Appropriate District Office District I  State of New Mexico Energy, Minerals and Natural Resources	Form C-103 October 13, 2009	
	1625 N. French Dr., Hobbs, NM 88240	WELL API NO.	
	District II 1301 W. Grand Ave. Artesia NIM 800 C CONSERVATION DIVISION	30-025-26789	
	1301 W. Grand Ave., Artesia, NM 8870 CONSERVATION DIVISION District III 1220 South St. Francis Dr.	5. Indicate Type of Lease	
	1000 Rio Brazos Rd., Aztec, NM 87410	STATE FEE	
	District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	6. State Oil & Gas Lease No.	
	87505 LICE		
1	SUNDRY NOTICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name	
İ	(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	CENTER AL MA CHILIM LINUT	
•	PROPOSALS.)	CENTRAL VACUUM UNIT  8. Well Number 145	
ļ	1. Type of Well: Oil Well Gas Well Other INJECTOR		
	2. Name of Operator	9. OGRID Number 4323	
}	CHEVRON U.S.A. INC.  3. Address of Operator	10. Pool name or Wildcat	
	15 SMITH ROAD, MIDLAND, TEXAS 79705	VACUUM GRAYBURG S/A	
-		VACOUN GRATBORG 5/A	
4. Well Location		Troom 1	
Unit Letter N: 1310 feet from the SOUTH line and 2475 feet from the WEST line			
Section 31 Township 17S Range 35E NMPM County LEA			
ļ	11. Elevation (Show whether DR, RKB, RT, GR, etc.	2.)	
Ĺ			
	10 Cl 1 A '	D O.1 D .	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
	NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
	PERFORM REMEDIAL WORK   PLUG AND ABANDON   REMEDIAL WORK   ALTERING CASING		
		RILLING OPNS. P AND A	
	PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMEN	<del></del>	
	DOWNHOLE COMMINGLE		
	_		
OTHER: 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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of		
proposed completion or recompletion.			
(	04-01-2011: NOTIFIED NMOCD. PRESS TEST TO 600 PSI FOR 38 MINUTES. GOOD TEST. (ORIGINAL CHART & COPY OF		
CHART ATTACHED). WITNESSED BY SYLVIA DICKEY, NMOCD.			
The state of the s			
1	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 04-08-2011			
THEE REGULATORY SI ECIALIST DATE 04-08-2011			
Type or print name DENISE PINKERTON E-mail address: <u>leakejd@chevron.com</u> PHONE: 432-687-7375			
For State Use Only			
		1/12/2011	
	APPROVED BY: TITLE STAFF N	DATE 4-12-2011	
(	Conditions of Approval (if any):	,	
		ť	
		\	
		· · · · · · · · · · · · · · · · · · ·	



CVU 145 26789 30-025-26789 N-31 175 35 E 1310' S 2475' W