Submit 3 Copies To Appropriate District Office	State of New Mexico	Γ- 0.101
10003, [4](1 00240)	ergy, Minerals and Natural Resources	Form C-103 Revised March 25, 1999
District II 1301 W. Grand Avenue, Artesia, NM 88210  O	IL CONSERVATION DIVISION	30-025-02290
1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.	5. Indicate Type of Lease
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM 87505	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
SUNDRY NOTICES AN	B-3936	
DIFFERENT RESERVOIR LISE "APPLICATION FOR	DDII OD TO SEE	7. Lease Name or Unit Agreement Name:
1. Type of Well:	( State Criti) FOR SOCH	West Vacuum Unit
Oil Well Gas Well Other Injection  2. Name of Operator		
Chevron USA, Inc.		8. Well No. 40
3. Address of Operator 15 Smith Rd. Midland, Tx 79705		9. Pool name or Wildcat
4. Well Location		Vacuum Grayburg S.A.
Unit Letter C : 660 feet from the north line and 1980 for the worth		
rine and reet from the west line		
Section 4 Township 18-S Range 34-E NMPM County Lea  10. Elevation (Show whether DR, RKB, RT, GR, etc.)		
11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data  NOTICE OF INTENTION TO:  SUBSECUENT DEPORT OF		
PERFORM REMEDIAL WORK PLUG AND ARANDON PLUG PENEDIAL WORK REPORT OF:		
TELEDOMANIA	E PLANS COMMENCE DRIL	
PULL OR ALTER CASING MULTIP		ARANDONIATAIT
COMPL		Ь
OTHER:	OTHER:	<u></u>
12. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date or recompilation.  SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion		
1. Set 5 1/2 CIBP @ 4350 spot 25sx plug fr/4350 4450/0		
2. Displace hole w/MLF 9.5# Brine w/25# Gel P/BBL. 3. Spot 25sx plug fr/2700-2500(Yates,B-sait)Tag @ 2480		
1. Opor 2000 plug II/ 1000-1400/8 5/8 shoe T-salt/Tog @ 4005		
<ul><li>5. Spot 40sx plug fr/300-surf(surf)Ta</li><li>6. Install dry hole marker 1-30-03</li></ul>	g @ surf	
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Amproved as a	and agging of the Well Bore.	
$t \sim \text{DIM} \mathcal{L}_{t}^{p} \mathcal{L}_{t}^{p} \mathcal{L}_{t}^{p}$	. i remined until	
surface restore	tion is completed.	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
OYON LATTER TO THE STATE OF THE		
0-00	TITLE MANAGER / S	DATE 1-30-03
Type or print name Immy BA61Ey (This space for State use)  Telephone No.915 520-8756		
·	ORIGINAL SIGNED BY	
APPPROVED BYConditions of approval, if any:	GARY W. TWINE	FEB 1 1 2003
OC FIELD REPRESENTATIVE II/STAFF MANAGER		

<u>5</u>25

D

Holes