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U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease  
State ☒ Fee ☐  
5. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS

(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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Chevron U.S.A. Inc.	8. Farm or Lease Name State 3-32
3. Address of Operator P.O. Box 670 Hobbs, NM 88240	9. Well No. 7
4. Location of Well UNIT LETTER C 760 North 1980 West 32 17S 35E THE LINE, SECTION TOWNSHIP RANGE N.M.P.M.	10. Field and Pool, or Wildcat Vacuum Glorieta
11. Elevation (Show whether DF, RT, GR, etc.) 3967' GR	12. County Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/> Repair Casing	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <input type="checkbox"/>

17. 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.

Found parted and collapsed casing while performing a pump change. 4 1/2" casing is parted @ 519' and collapsed below 519'. Propose to repair casing as necessary. Test casing to 500 psi for 30 minutes. Return well to production.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED P. H. Bullock Jr. TITLE Division Drilling Manager DATE 4-22-1986

ORIGINAL SIGNED BY JERRY SEXTON  
PROVED BY DISTRICT 1 SUPERVISOR TITLE \_\_\_\_\_ DATE APR 23 1986

CONDITIONS OF APPROVAL, IF ANY: