

Submit 3 Copies To Appropriate District Office  
 District I  
 1625 N. French Dr., Hobbs, NM 88240  
 District II  
 811 South First, Artesia, NM 88210  
 District III  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV  
 2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico  
 Energy, Minerals and Natural Resources  
 OIL CONSERVATION DIVISION  
 2040 South Pacheco  
 Santa Fe, NM 87505

Form C-103  
 Revised March 25, 1999

WELL API NO. 30-025- <u>09547</u>
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. 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. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		7. Lease Name or Unit Agreement Name:  MYERS LANGLIE MATTIX UNIT
2. Name of Operator OXY USA WTP Limited Partnership 192463	8. Well No. <u>242</u>	
3. Address of Operator P.O. BOX 50250 MIDLAND, TX 79710-0250	9. Pool name or Wildcat LANGLIE MATTIX 7RVR-QN-GB	
4. Well Location  Unit Letter <u>L</u> : <u>1980</u> feet from the <u>South</u> line and <u>660</u> feet from the <u>West</u> line  Section <u>12</u> Township <u>24S</u> Range <u>36E</u> NMPM County <u>LEA</u>		
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: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/> OTHER: <input type="checkbox"/>		SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input checked="" type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER: <input type="checkbox"/>	
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12. 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

*Do Not Release Pressure Below 5000' & Plug in Unit on loc., 210 BBL. TANK*  
 11-28-00

MLMU-242

NOTIFY NMOCD OF INTENT TO P&A 11/23/00. MIRU PU 11/24/00, RDWH, NU BOP. RIH & SET CIBP @ 3400'. CIRC HOLE W/ 9.5#MLF, SPOT 25sx CMT, WOC. RIH & TAG @ 3296', POOH TO 2965', SPOT 60sx CMT, POOH, WOC. RIH & TAG @ 2633', POOH TO 1254', SPOT 25sx CMT, POOH, WOC. RIH & TAG @ 1100', RIH & PERF @ 350', M&P 40sx CMT, POOH, WOC. RIH & TAG @ 183', SPOT 30sx CMT SURFACE PLUG, RDP 11/28/00. DUG OUT CELLAR, CUT OFF WH & ANCHORS, INSTALL DRY HOLE MARKER, CLEAN LOCATION, WELL P&A'D.

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

SIGNATURE David Stewart TITLE REGULATORY ANALYST DATE 3/22/01

Type or print name DAVID STEWART Telephone No. 915-685-5717  
 (This space for State use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
 Conditions of approval, if any:

*GW*