

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Div.
P.O. Box 1980
Hobbs, NM 88241
FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993
Lease Designation and Serial No.
LC 062391

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

OXY USA Inc.

16696

3. Address and Telephone No.

P.O. Box 50250 Midland, TX 79710-0250

915-685-5717

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

880 FSL 660 FWL SWSW (M) Sec 34 T17S R33E

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Wyatt Federal #3

9. API Well No.

30-025-01403

10. Field and Pool, or Exploratory Area

Corbin Abo 13150

11. County or Parish, State

Lea NM

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☒ Notice of Intent
☐ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other Temporarily Abandon
☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log (see 1))

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

TD - 8830' PBTD - 8797' PERFS - 8638-8710' PKR/CIBP -

OXY USA INC. REQUESTS TO TEMPORARILY ABANDON THIS WELL FOR FUTURE EXPANSION OF THE WATERFLOOD UNIT.

- 1) NOTIFY BLM/NMOC OF CASING INTEGRITY TEST 24 HRS IN ADVANCE.
- 2) RU PUMP TRUCK, CIRCULATE WELL WITH TREATED WATER, PRESSURE TEST CASING TO 500# FOR 30 MIN.

FOR
COLLECTION OF APPROVAL

14. I hereby certify that the foregoing is true and correct

Signed

David Stewart

Title

David Stewart

Regulatory Analyst

Date

4/10/97

(This space for Federal or State office use)

Approved by (ORIG. SGD.) ALEXIS C. SWOBODA

Title

REG. ANALYST

Date

Conditions of approval, if any: