

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO.
30-025-05704

5. Indicate Type of Lease
STATE FEE

6. State Oil & Gas Lease No.
82330

7. Lease Name or Unit Agreement Name
East Eumont Unit
008598

8. Well No.
75

9. Pool name or Wildcat
Eumont Yates 7 Rvr Qn
022800

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 GAS WELL OTHER Water Injection

2. Name of Operator
OXY USA Inc. 16696

3. Address of Operator
P.O. Box 50250 Midland, TX 79710-0250

4. Well Location
Unit Letter I : 1980 Feet From The South Line and 660 Feet From The East Line

Section 27 Township 19S Range 37E NMPM Lea Country

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

- PERFORM REMEDIAL WORK
- TEMPORARILY ABANDON
- PULL OR ALTER CASING
- OTHER: _____
- PLUG AND ABANDON
- CHANGE PLANS

SUBSEQUENT REPORT OF:

- REMEDIAL WORK
- COMMENCE DRILLING OPNS.
- CASING TEST AND CEMENT JOB
- OTHER: MIT & TA Status
- ALTERING CASING
- PLUG AND ABANDONMENT

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.

This Approval of Temporary
Abandonment Expires 11-2-2002

TD - 3912' PBTD - 3905' PERFS - 3823'-3837' PKR/ETBP - 3706'

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

- 1) NOTIFIED BLM/NMOC D OF CASING INTEGRITY TEST.
- 2) RU PUMP TRUCK 11/25/97, PRESSURE TEST CASING TO 480 #
FOR 30 MIN.

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 12/2/97

TYPE OR PRINT NAME David Stewart

TELEPHONE NO. 9156855717

(This space for State Use)

ORIGINAL SIGNED BY

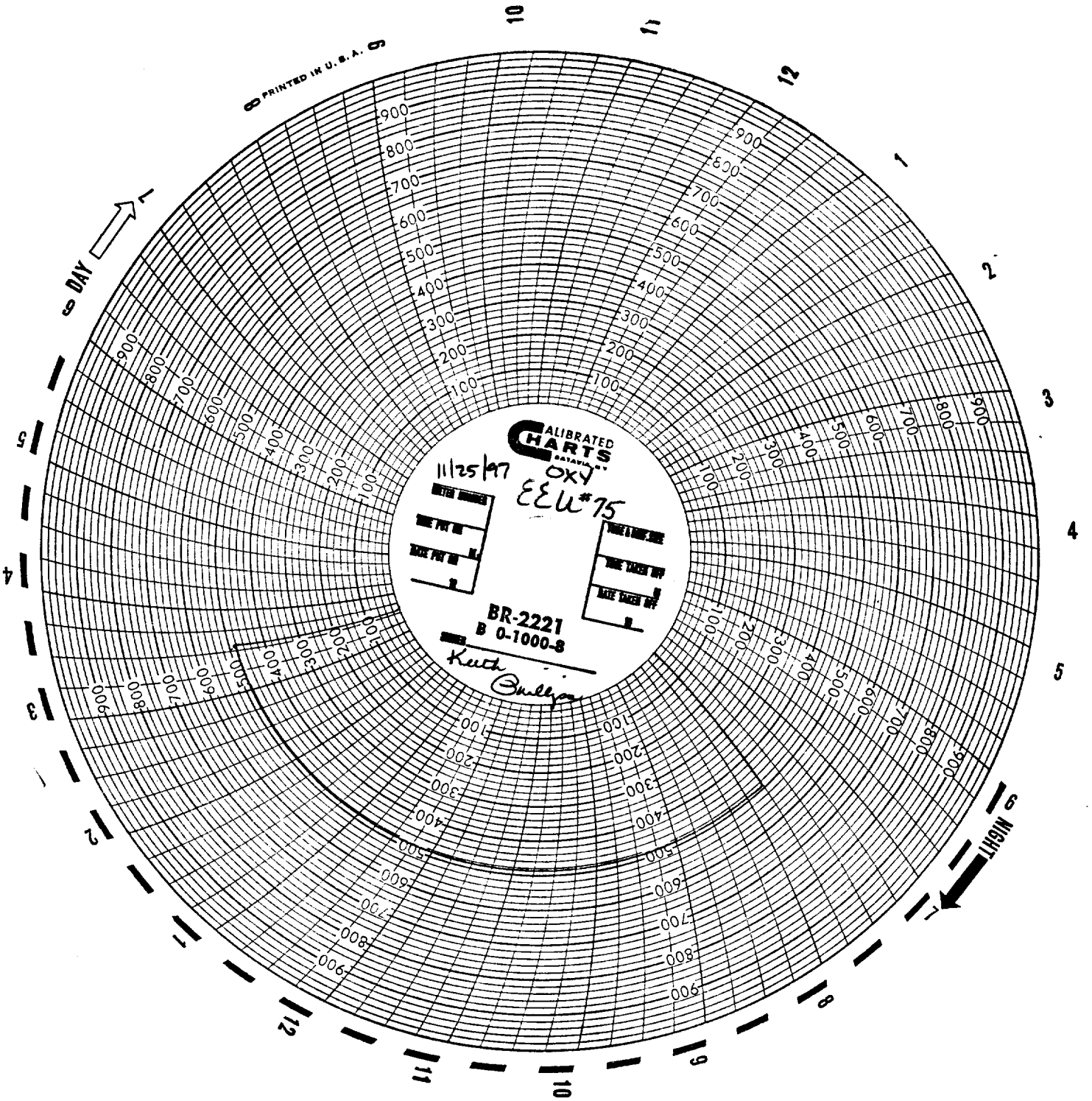
APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

TCS 56

JAN 02 1998

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CALIBRATED CHARTS
 11/25/47 OXY
 EEU#75
 BR-2221
 B 0-1000-8
 Kutch
 Sullivan

DAY

NIGHT