

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

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

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

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.	30- 025- 05829
5. Indicate Type of Lease	STATE ☒ FEE ☐
6. State Oil & Gas Lease No.	82736
7. Lease Name or Unit Agreement Name	East Eumont Unit 008598
8. Well No.	102
9. Pool name or Wildcat	022800 Eumont Yates 7 Rvr Qn
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	

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 ☐

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 P : 660 Feet From The South Line and 660 Feet From The East Line

Section 35 Township 19S Range 37E NMPM Lea Country

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐		CASING TEST AND CEMENT JOB ☐	
OTHER: ☐		OTHER: <u>MIT - TA STATUS</u> ☒	

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.

TD - 3980' PBTD - 3907' PERFS - 3782-3866' PKR/CIBP - 3662'

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

1) NOTIFIED BLM/NMOC D OF CASING INTEGRITY TEST.

2) RU PUMP TRUCK 7/10/97, PRESSURE TEST CASING TO 540 # 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 10/9/97

TYPE OR PRINT NAME David Stewart

TELEPHONE NO. 9156855717

(This space for State Use)
ORIGINAL SIGNED BY CHRIS WILLIAMS
DISTRICT I SUPERVISOR

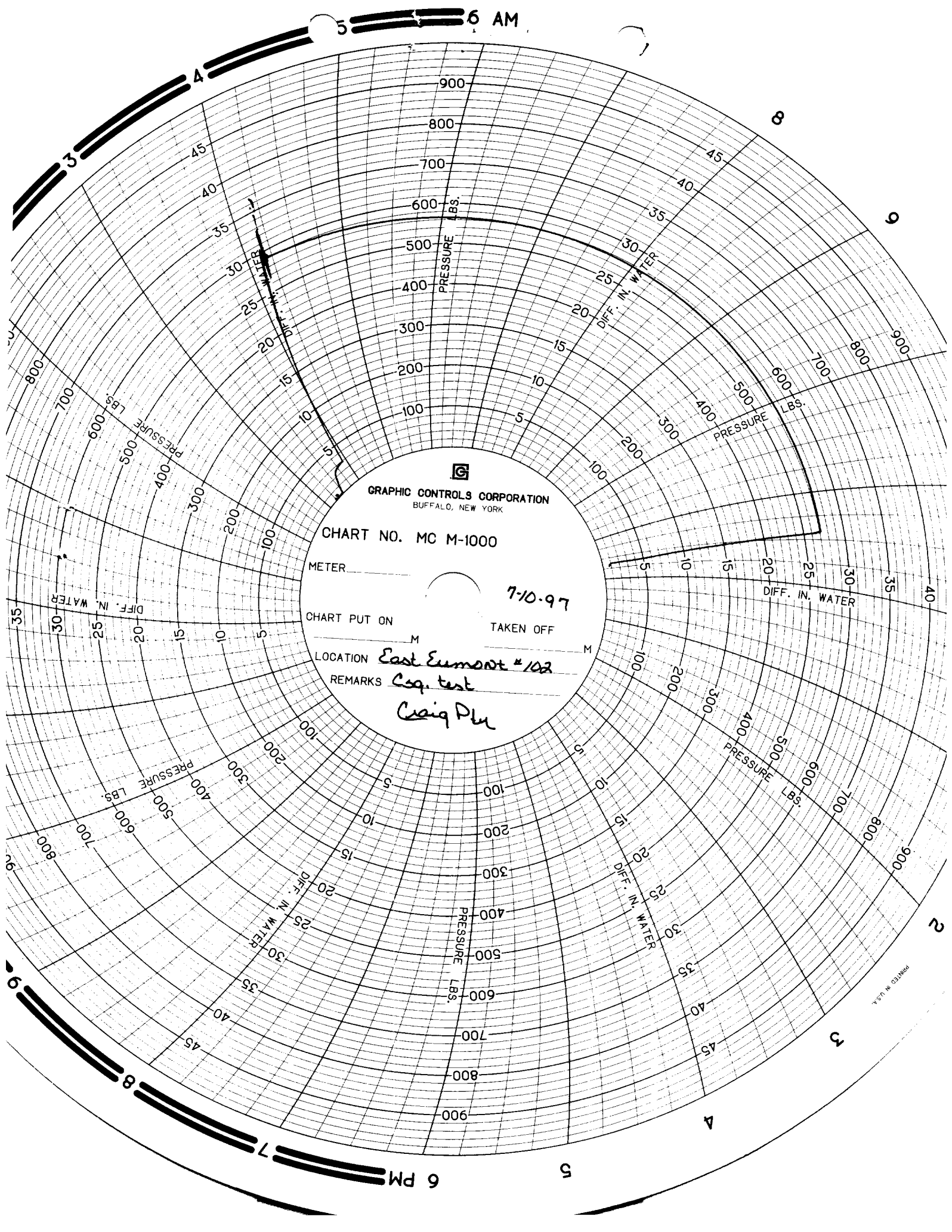
OCT 23 1997

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

Approval of Temporary Abandonment Expires 10-23-2002

5 6 AM



GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK

CHART NO. MC M-1000

METER

7-10-97

CHART PUT ON

TAKEN OFF

LOCATION

East Eumont #102

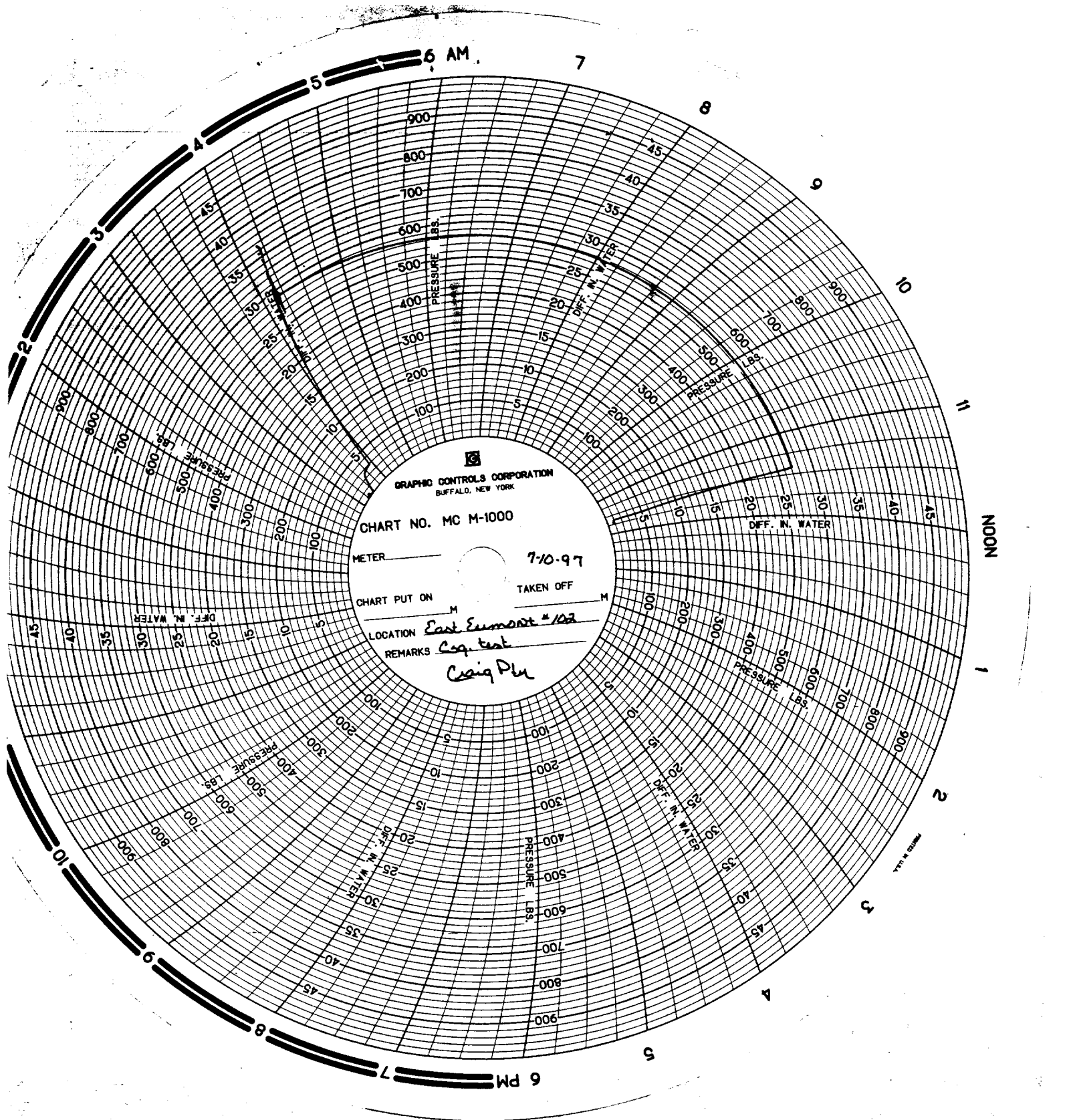
REMARKS

Csq. test

Craig P. H.

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GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK

CHART NO. MC M-1000

METER _____ 7-10-97

CHART PUT ON _____ M TAKEN OFF _____ M

LOCATION *East Eumont #102*

REMARKS *Csq. test*
Craig Plu