Submit 3 Copies To Appropriate District State of New Months of New Minerals and National State of New Minerals and New Minerals and National State of New Minerals and New Minerals a			Form C-103
Office Energy, Minerals and Na 1625 N. French Dr., Hobbs, NM 87240	turai Nesources	WELL API NO.	June 19, 2008
District II 1301 W. Grand Ave., Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV 1220 S. St. Francis Dr., Santa Fe, NM DEC 0 4 2012		30-025-35961	
		5. Indicate Type of Lease STATE X F	EE 🗆
District IV	8/303	6. State Oil & Gas Lease N	
87303		o. State on & Gas Bease 1	
SUNDRY NOTICES AND REPORTS ON WELLS DO NOT USE THIS FORM FOR PROPOSATE DEATH OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well:		7. Lease Name or Unit Ag	reement Name:
		0 0 0	
		Conoco State 8. Well Number	
Oil Well Gas Well X Other		3	
Name of Operator OXY USA INC.		9. OGRJD Number 16696	/
3. Address of Operator		10. Pool name or Wildcat	
P.O. Box 4294, Houston, TX 77210-4294 4. Well Location		Hobbs: Drinkard/Hobbs	s: Tubb (Gas)
			1
Unit Letter : feet from the S	outh line and	2055 feet from the	<u> </u>
Section 33 Township 18-S		NMPM Coun	ty Lea
11. Elevation (Show whether	er DR, RKB, RT, GR, e 3639' GR	tc.)	
	,	D of D	
12. Check Appropriate Box to Indicate	e Nature of Notice,	Report, or Other Data	
NOTICE OF INTENTION TO	l cur		٥٢.
NOTICE OF INTENTION TO:		SEQUENT REPORT	
ERFORM REMEDIAL WORK PLUG AND ABANDON	REMEDIAL WORK		RING CASING
EMPORARILY ABANDON	COMMENCE DRILL	<u> </u>	D A
ULL OR ALTER CASING	CASING/CEMENT	IOB L	
OWNHOLE COMMINGLE			
THER:	OTHER:		
 Describe proposed or completed operations. (Clearly state all j of starting any proposed work). SEE RULE 1103. For Multip 			
or recompletion.	or comprehensi made	ii wenoore angram or propos	ea completion
OXY USA INC. wishes to rescind the proposal to Form C-103 approved 3/9/12 (copy attached). Co			
(DHC-3086).		o carronoly a producting	
Spud Date: Rig Rel	ease Date:		
hereby certify that the information above is true and complete to the	he hest of my knowledge	to and halief	
	ne best of my knowledg	ge and belief.	
IGNATURE Mark Stephens TI		mpliance Analyst DATE.	11/30/12
ype or print name <u>Mark Stephens</u> E-	@OXY.COM PHONE	E (713) 366-5158	
	mail address:	FRON	<u> </u>
For State Use Only	TILE DEST. 11		17 3
	TITLE 157.	DATE	<u>Z-05-20</u> /
Conditions of Approval (if any):			/
		_	50 0 5 2012