

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

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

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

WELL API NO.	30-015-30372
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	

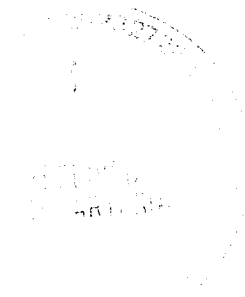
<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		7. Lease Name or Unit Agreement Name  OXY MAGNI STATE COM. 23596	
1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	2. Name of Operator OXY USA Inc. 16696		8. Well No. 1
3. Address of Operator P.O. Box 50250 Midland, TX 79710-0250		9. Pool name or Wildcat Undesignated Logan Draw Morrow	
4. Well Location Unit Letter <u>K</u> : <u>1650</u> Feet From The <u>South</u> Line and <u>1980</u> Feet From The <u>West</u> Line Section <u>10</u> Township <u>17S</u> Range <u>27E</u> NMPM County			
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3402'			

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input checked="" type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: _____ <input type="checkbox"/>		OTHER: _____ <input type="checkbox"/>	

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.

SEE OTHER SIDE



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 9/23/98  
 TYPE OR PRINT NAME David Stewart TELEPHONE NO. 9156855717

(This space for State Use)

APPROVED BY Jim W. Green TITLE District Supervisor DATE 9-28-98

CONDITIONS OF APPROVAL, IF ANY:

ATTACHMENT C-101  
OXY USA Inc.  
OXY MAGNI STATE COM. #1  
SEC 10 T17S R27E  
Eddy County, NM

PROPOSED TD: 9800' TVD

BOP PROGRAM: 0' - 1500' 20" X 40' Conductor pipe with 13-3/8" rotating head bolted on. To be used as divertor only.

1500'-9800' 8-5/8" 5M blind and pipe rams with 5M annular preventer and rotating head below 6000'.

CASING: 8-5/8" 24# K55 ST&C casing @ 1500'. 12-1/4" hole.

4-1/2" 11.6# N80 LT&C casing @ 9800'. 7-7/8" hole.

CEMENT: Surface - Circulate cement with 475sx 35:65 POZ/C with 6% Bentonite + .005% Static Free + .005gps FP-6L + 2% CaCl<sub>2</sub> + 0.25#/sx Cello Flake + 5#/sx Gilsonite followed by 300sx Cl C with 2% CaCl<sub>2</sub> + .005#/sx Static Free + .005gps FP-6L.

Production - Cement with 655sx 15:61:11 POZ/C/CSE with .005#/sx Static Free + 8#/sx Gilsonite + .5% FL-25 + .5% FL-52 + .005gps FP-6L followed by 75sx Cl C with .005#/sx Static Free + .7% FL-25 + .005gps FP-6L.

Estimated top of cement is 6000'.

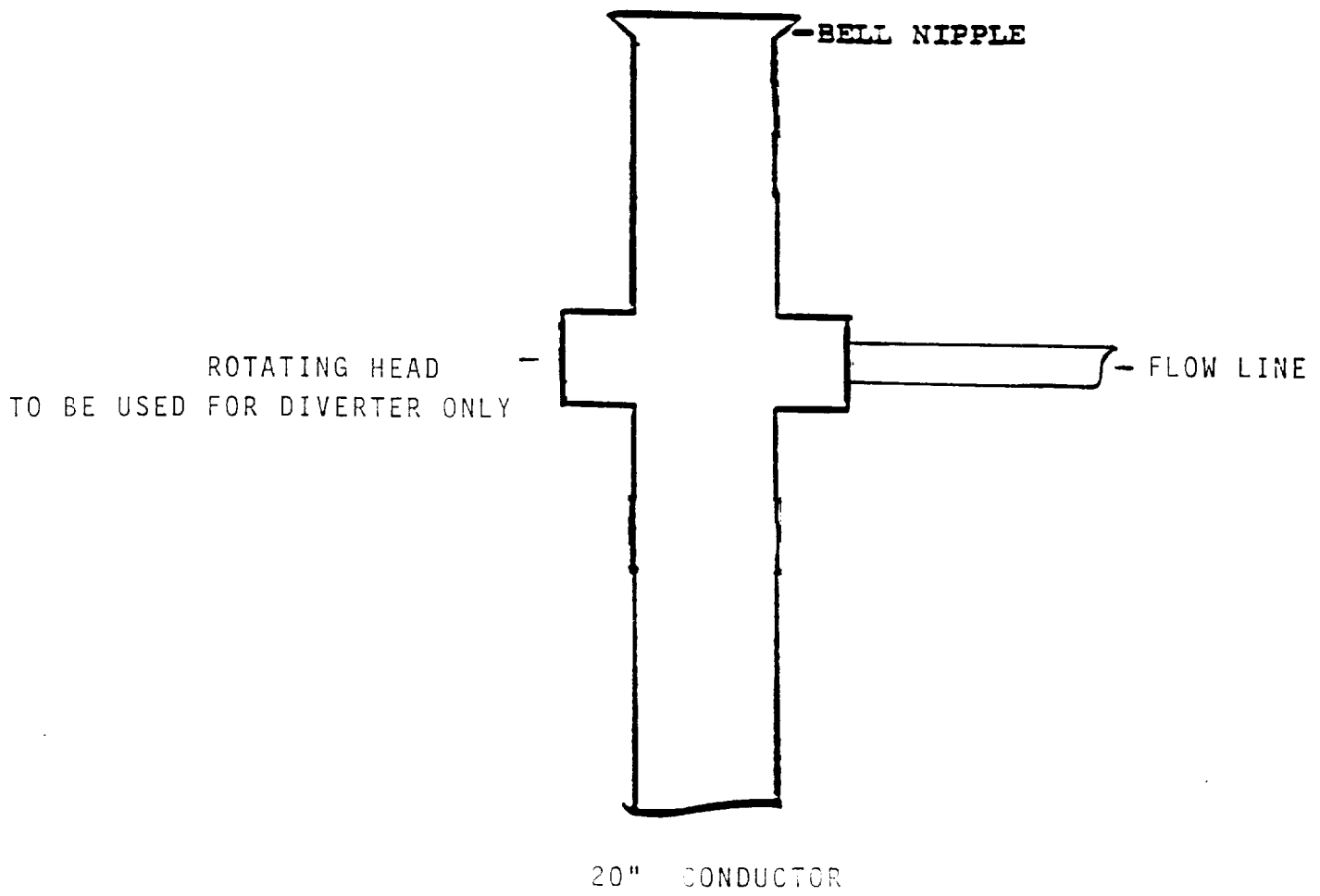
Cement volumes may be adjusted to hole caliper.

MUD: 0' - 1500' FW/gel/lime. Lime for pH control (9-10). Paper for seepage. Wt. 8.6-9.2ppg, vis 28-34sec.

1500'-6000' Fresh water. Caustic for pH control (9-9.5). Paper for seepage. Wt. 8.3-8.5ppg, vis 28-29sec

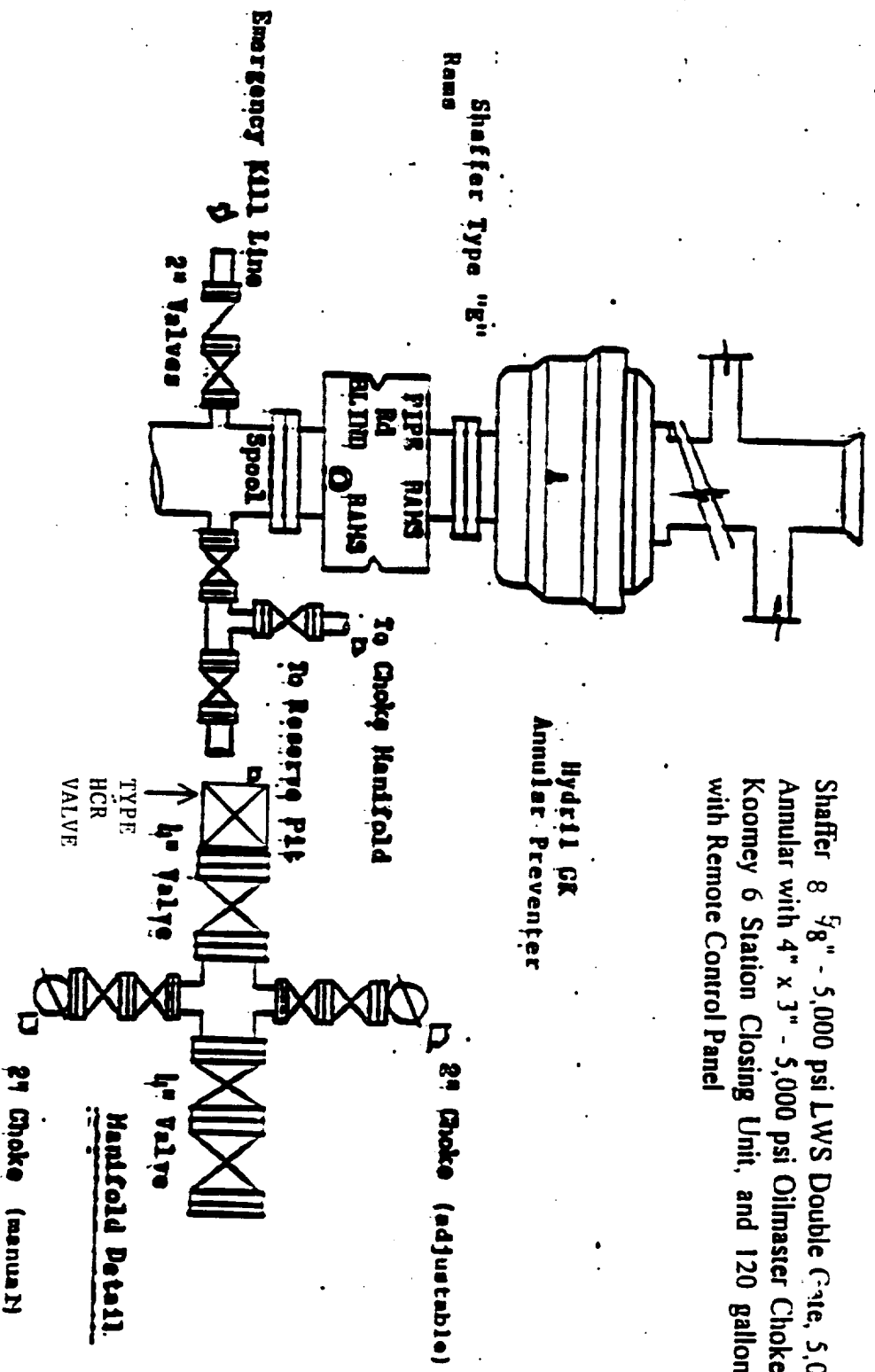
6000'-8700' Cut brine. Caustic for pH control (10-10.5). Wt. 9.6-10.0ppg, vis 28-29sec

8700'-9800' Mud up with a XCD Polymer system Wt. 9.6-10.0ppg, vis 42-48sec WL 8cc.



**BLOWOUT PREVENTOR SCHEM**

EXHIBIT A



Shaffer 8 5/8" - 5,000 psi LWS Double Gate, 5,000 psi Shaffer Annular with 4" x 3" - 5,000 psi Oilmaster Choke Manifold and Koomey 6 Station Closing Unit, and 120 gallon Accumulator with Remote Control Panel

Hydril GK  
Annular Preventer

Shaffer Type "G"  
Rams

PIP RAMS  
BLIND RAMS

Emergency Kill Line

2" Valves

Spool

To Choke Manifold

To Reserve Pit

4" Valve

TYPE HCR VALVE

2" Choke (adjustable)

4" Valve

Manifold Detail

2" Choke (manual)

Choke Manifold

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

WELL API NO. 30-015-30372

5. Indicate Type of Lease  
STATE  FEE

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.)

7. Lease Name or Unit Agreement Name  
OXY MAGNI STATE COM. 23596

1. Type of Well:  
OIL WELL  GAS WELL  OTHER

8. Well No. 1

2. Name of Operator OXY USA Inc. 16696

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

9. Pool name or Wildcat Undesignated Logan Draw Morrow

4. Well Location  
Unit Letter K : 1650 Feet From The South Line and 1980 Feet From The West Line  
Section 10 Township 17S Range 27E NMPM County

10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3402'

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data  
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK  PLUG AND ABANDON  TEMPORARILY ABANDON  CHANGE PLANS  PULL OR ALTER CASING  OTHER:   
SUBSEQUENT REPORT OF: REMEDIAL WORK  ALTERING CASING  COMMENCE DRILLING OPNS.  PLUG AND ABANDONMENT  CASING TEST AND CEMENT JOB  OTHER:

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.

SEE OTHER SIDE

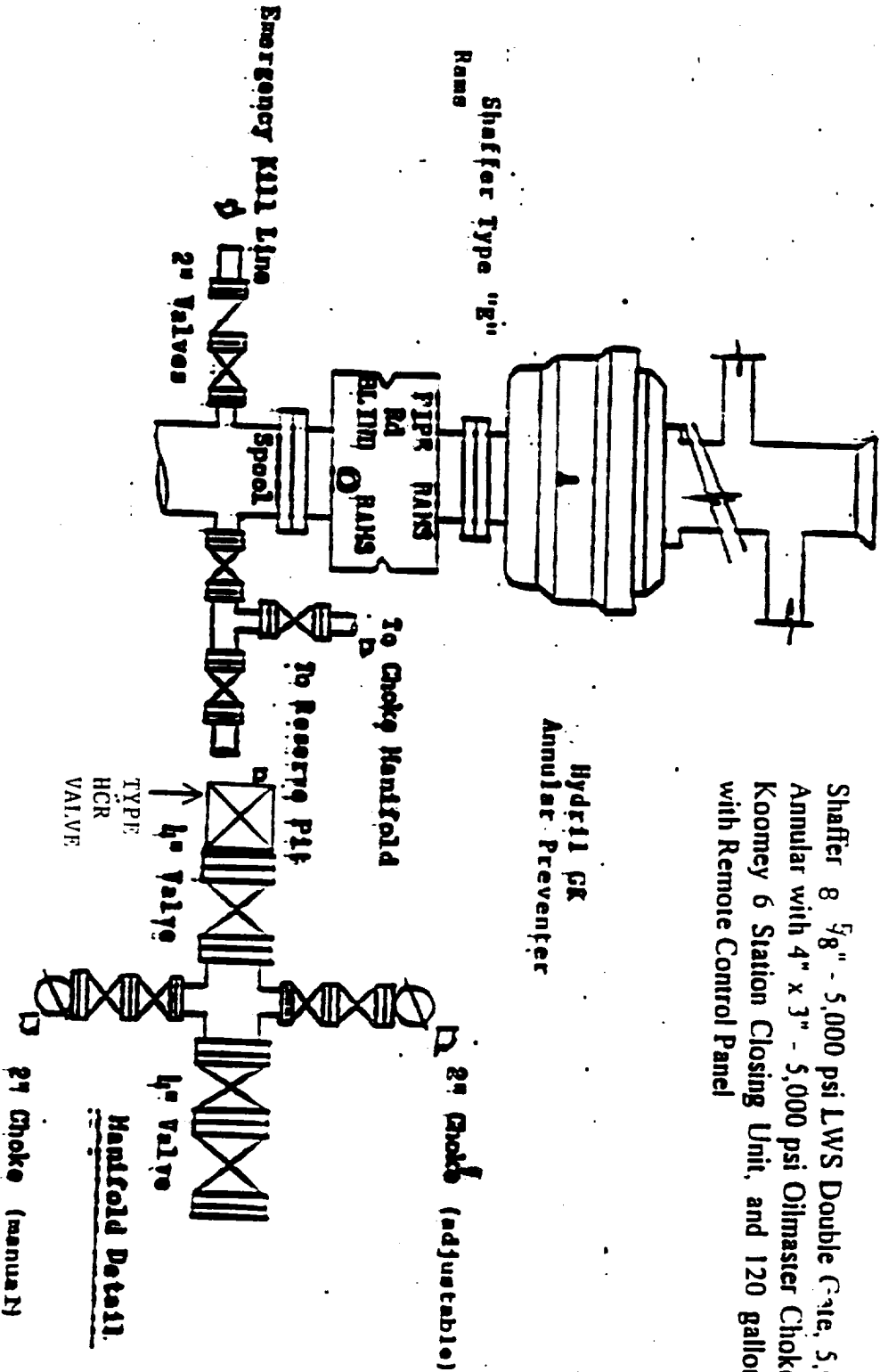


I hereby certify that the information above is true and complete to the best of my knowledge and belief.  
SIGNATURE David Stewart TITLE Regulatory Analyst DATE 9/23/98  
TYPE OR PRINT NAME David Stewart TELEPHONE NO. 9156855717

(This space for State Use)  
APPROVED BY TIM W. GUM TITLE DISTRICT II SUPERVISOR DATE 9-28-98  
CONDITIONS OF APPROVAL, IF ANY:

**BLOWOUT PREVENTOR SCHEMATIC**

EXHIBIT A



Shaffer 8 5/8" - 5,000 psi LWS Double Gate, 5,000 psi Shaf Annular with 4" x 3" - 5,000 psi Oilmaster Choke Manifold a Koomey 6 Station Closing Unit, and 120 gallon Accumulat with Remote Control Panel

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4. Well Location  
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Section 10 Township 17S Range 27E NMPM County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)  
3402'

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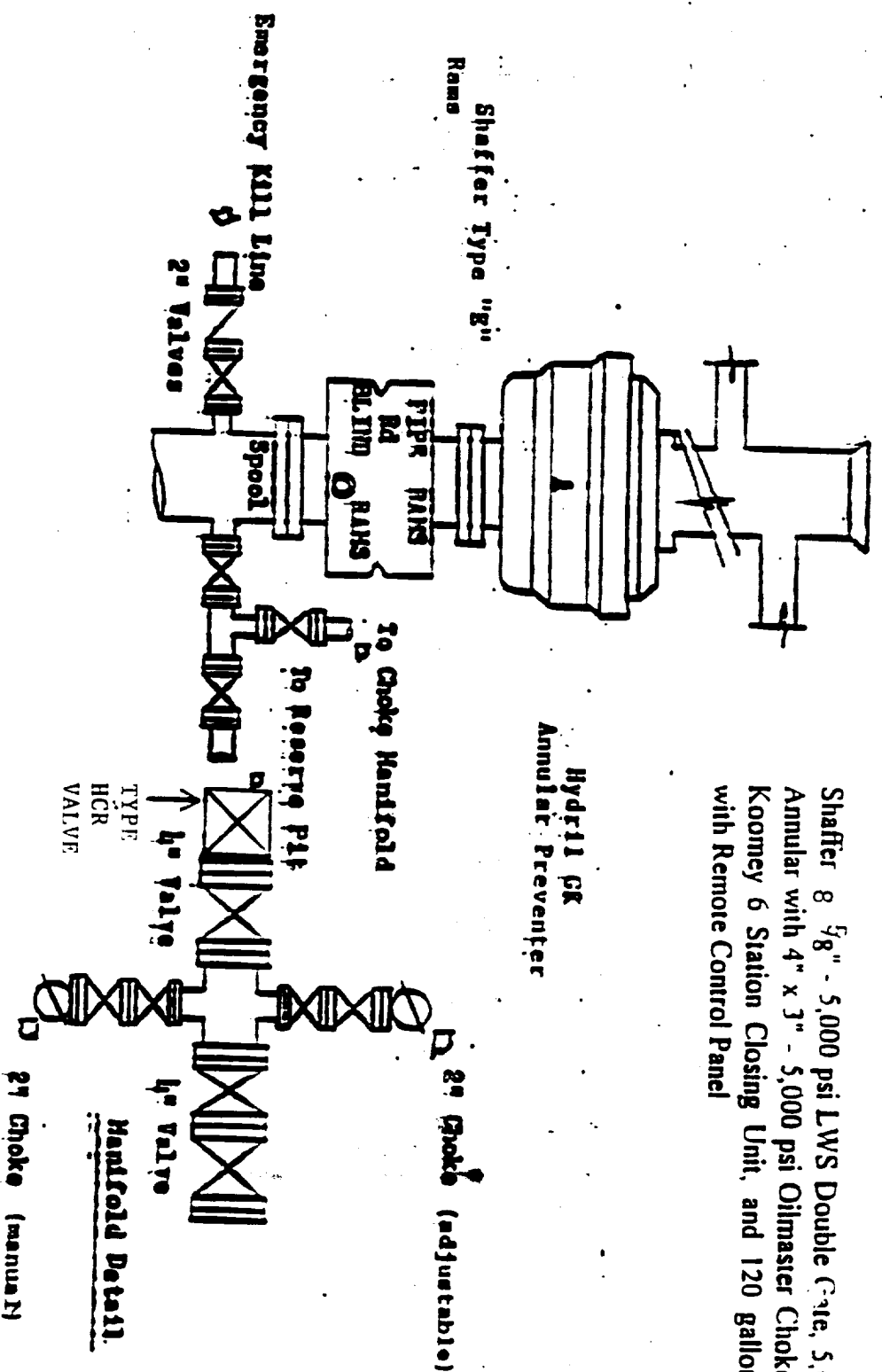
SEE OTHER SIDE

RECEIVED  
OIL ARTESIA

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TYPE OR PRINT NAME David Stewart TELEPHONE NO. 9156855717

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**ORIGINAL SIGNED BY TIM W. GUM**  
**DISTRICT II SUPERVISOR**  
APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE 9-28-98  
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Choke Handfold