## State of New Mexico E. \_ \_ y, Minerals and Natural Resources Department

Form C-103	
Revised 1-1-8	

<u>DISTRICT I</u>	OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088		WELL API NO. 30-0(5-30577	
P.O. Box 1980, Hobbs, NM 88240				
DISTRICTU				
P.O. Drawer DD, Artesia, NM \$8210 DISTRICT III	,		5. Indicate Type of Lesse STATE STATE	
1000 Rio Brazos Rd., Aziec, NM 87410			6. State Oil & Gas Lease No. 5-636	
	ICES AND REPORTS ON W			
	OPOSALS TO DRILL OR TO DEEPE RVOIR. USE "APPLICATION FOR F >-101) FOR SUCH PROPOSALS.)	EN OR PLUG BACK TO A PERMIT!	7. Lease Name or Unit Agreement Name	
1. Type of Well:			OXY Malt-O-Meal State	
Off. OAS WILL   2. Name of Operator /	OTHER DY	1 Hole	24260	
OXY USA I	ıc.	16696	8. Well No.	
3. Address of Operator P.O. Box	0250 Midland, TX	79710-0250	9. Pool same or Wildow WC Red Lake Morrow, NE	
4. Well Location			,	
Unit Letter : : !   Box	20 Feet From The South	\ Line and	O Feet From The West Line	
Section 22	Towaship 175	Range 28E	NMPM Eddy County	
	10. Elevation (Show wheth	# DF, RKB, RI, GR, <b>a</b> c.) \$\&\O		
11. Check	Appropriate Box to Indicate		eport, or Other Data	
NOTICE OF IN		4	SEQUENT REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	G OPNS. 🔲 PLUG AND ABANDONMENT 🗵	
PULL OR ALTER CASING	CHANGE PLANS [ ]	CASING TEST AND C	EMENT JOB	
OTHER:  12. Describe Proposed or Completed Operators  work) SEE RULE 1103.	(§° 1 (§)	:   UIRER:		
12. Describe Proposed or Completed Open	micros (Clearly state All persinent despits	and give pertinent dates, inclu	ding estimated date of starting any proposed	
work) SEE RULE 1103.	OCO CEIVED IN	• •	iding estimated date of starting any proposed	
	"ITESIA SI			
DRILL 7-7/8" HOL	E TO 10425', 4/1%99, C	IRC HOLE, RIH W/	LOGS, POOH. REC	
	RES FROM MIKE STUBBLEF X CL H CMT. POOH LDDP			
	POT 25sx CL C CMT. PO	-		
POOH LDDP TO 215	0', SPOT 25sx CL C W/	3% CaCl <sub>2</sub> . POOH 1	LDDP TO 1600', CHC, WOC-	
	CMT @ 2000', POOH LDD			
	MT SURF PLUG. JET & C ESS. CUT OFF CSG 3' B			
	VE, INSTALL DRY HOLE M			
			D. Post ID-2 7-2-99	
			Puf	
I hereby curtify that the information above is t	us and complete to the best of my knowledge	and belief.	***************************************	
SIGNATURE SIGNATURE		Regulatory	Analyst DATE 6 (699	
TYPEOR PRENT NAME David S			<b>ТЕГЕРНОМЕ NO.</b> 915685571	
(This space for State Use)	Sim W. Bun	2 11.4.	A	
	Sum . Journ	Westrie	15 pervisor	
APTROVED BY		TITLE	DATE / 1	
COMPUTED AND APPROVAL. IF ANY:				