

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other Instructions on re-
verse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

ASF

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--" for such proposals.)

5. LEASE DESIGNATION AND SERIAL NO.
NMMN15003

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
NM OIL CONS COMMISSION

7. UNIT AGREEMENT NAME
Artesia, NM 88210

OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR
OXY USA INC.

MAY 03 '94

8. FARM OR LEASE NAME
GOVERNMENT AB

3. ADDRESS OF OPERATOR
P.O. BOX 50250 MIDLAND, TX 79710

9. WELL NO.
7

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

ARTESIA, OFFICE

10. FIELD AND POOL, OR WILDCAT
OLD MILLMAN RANCH BONE SPRINGS

660 FNL 1980 FWL NE-NW

11. SEC. T., R., M., OR BLK AND
SURVEY OR AREA
SEC 10 T20S R28E

14. PERMIT NO.
300152784700S01

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3273

12. COUNTY OR PARISH
EDDY

13. STATE
NM

Check Appropriate Box To Indicate Nature of Notices, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
(Other) ☐

PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
ABANDON* ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐
FRACTURE TREATMENT ☐
SHOOTING OR ACIDIZING ☐
(Other) ☐

REPAIRING WELL ☐
ALTERING CASING ☐
ABANDONMENT* ☐

SET CASING & CEMENT

(Note: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and five pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

DRILL 7-7/8" HOLE TO 6590' @ 1530hrs CDT 4/10/94. RIH W/ CNL-LDT-AIT-GR-CAL. CUT SIDEWALL CORES @ 6483, 6472, 6453, 6434, 6403, 6388, 6353, 6328, 6305, 6289, 4071, 4064, 4055, 4048, 4043, 4039, 4031, 4028, 4026, 4025'. RIH W/ 5-1/2" 15.5# K-55 CASING & SET @ 6590'. M&P 550sx PACESTTER LITE (C) CEMENT W/ 6% GEL TAILED W/ 200sx CL C W/ 5# CSE + .5% CF14 + 2% CACL2, DISPLACE W/ FW, PLUG DOWN @ 2245hrs CDT 4/11/94, WOC, BLM NOTIFIED BUT DID NOT WITNESS. ND BOP, SET SLIPS, CUT OFF CSG. REL RIG @ 0200hrs 4/12/94. SI WO COMPLETION UNIT.

J. Lora
2 1994

APR 14 10 50 AM '94
NO. 111 10 50 AM '94

18. I hereby certify that the foregoing is true and correct

SIGNED

[Signature]

TITLE

REGULATORY ANALYST

DATE

4/13/94

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side