


BUREAU OF LAND MANAGEMENT		SUNDRY NOTICES AND REPORTS ON WELLS		COMPLETION	
(Do not use this form for proposals to drill or to deepen or plug back to a different depth. Use "APPLICATION FOR PERMIT--" for such proposals.)				UNIT AGREEMENT NAME	
<div style="display: flex; justify-content: space-between;"> <div> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> </div> <div> JUN 13 8 25 AM '94 </div> </div>					
2. NAME OF OPERATOR OXY USA INC.				8. FARM OR LEASE NAME GOVERNMENT AB	
3. ADDRESS OF OPERATOR P.O. BOX 50250 MIDLAND, TX 79710				9. WELL NO. 9	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface SL - 330 FNL 230 FEL NE-NE BHL - 660 FNL 660 FEL NE-NE				10. FIELD AND POOL, OR WILDCAT OLD MILLMAN RANCH BONE SPRINGS	
				11. SEC., T., R., M., OR BLK AND SURVEY OR AREA SEC 10 T20S R28E	
14. PERMIT NO. 300152796400S01		15. ELEVATIONS (Show whether DF, RT, GR, etc.) O. C. D. ARTESIA, OFFICE 3268		12. COUNTY OR PARISH EDDY	
				13. STATE NM	
16. Check Appropriate Box To Indicate Nature of Notices, Report, or Other Data NOTICE OF INTENTION TO : <div style="display: flex; justify-content: space-around;"> <div> TEST/WATER SHUT-OFF <input type="checkbox"/>  FRACTURE TREAT <input type="checkbox"/>  SHOOT OR ACIDIZE <input type="checkbox"/>  REPAIR WELL <input type="checkbox"/>  (Other) <input type="checkbox"/> </div> <div> PULL OR ALTER CASING <input type="checkbox"/>  MULTIPLE COMPLETE <input type="checkbox"/>  ABANDON* <input type="checkbox"/>  CHANGE PLANS <input type="checkbox"/> </div> </div> SUBSEQUENT REPORT OF: <div style="display: flex; justify-content: space-around;"> <div> WATER SHUT-OFF <input type="checkbox"/>  FRACTURE TREATMENT <input type="checkbox"/>  SHOOTING OR ACIDIZING <input type="checkbox"/>  (Other) <input type="checkbox"/> </div> <div> REPAIRING WELL <input type="checkbox"/>  ALTERING CASING <input type="checkbox"/>  ABANDONMENT* <input type="checkbox"/> </div> </div> <div style="text-align: center; margin-top: 10px;"> <input checked="" type="checkbox"/> SET CASING &amp; CEMENT  <small>(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)</small> </div>					
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 TD @ 6725' 1845hrs CDT 6/3/94. CHC, RIH W/ GR-CNL-LDT-AIT-CAL, TOOH. RIH & CORE FROM 4101, 05, 08, 11, 22, 24, 47, 4151, 4857-4865, 4950-4970, 4976', POOH, CHC. RIH W/ 5-1/2" 15.5# K-55 CASING & SET @ 6718'. M&P 750sx CL C CMT W/ 6% GEL FOLLOWED BY 160sx CL C W/ 5#/sx CSE + .5% CF-14 + .2% CF-2, DISPLACE W/ FW, PLUG DOWN @ 0645hrs CDT 6/5/94, CIRC 134sx TO PIT, WOC. BLM NOTIFIED BUT DID NOT WITNESS. ND BOP, SET SLIP, CUT CSG, REL RIG @ 1100hrs CDT 6/5/94. SI WO COMPL UNIT.

18. Thereby certify that the foregoing is true and correct

SIGNED  TITLE REGULATORY ANALYST DATE 6/10/94

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

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