

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

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

OIL CONSERVATION DIVISION

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

WELL API NO. 30-015-26205

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.)

1. Type of Well:
OIL WELL ☐ GAS WELL ☒ OTHER

2. Name of Operator
OXY USA Inc. /

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

4. Well Location
Unit Letter N : 990 Feet From The South Line and 1880 Feet From The West Line
Section 36 Township 23S Range 23E NMPM Eddy County

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

4333.7'

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 checked="" type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input 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.

TD-10850' It is proposed to plug and abandon this well in the following manner:

Formation	Depth	Cement
Morrow A,B	10550'-10341'	70 sx Cl H + .25% LWL
Morrow Carbonate	10090'-9990'	45 sx Cl H
Atoka	9743'-9642'	50 sx Cl H
Strawn	9120'-9020'	45 sx Cl H
Wolfcamp	7585'-7485'	35 sx Cl H
Bone Springs	5361'-5261'	35 sx Cl H
8-5/8" Csg	2550'-2450'	35 sx Cl H
13-3/8" Csg	354'-254'	30 sx Cl H
Surface	30'-surface	10 sx Cl H

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE FA Vitrano TITLE Operations Manager-Prod. DATE 1/12/90
TYPE OR PRINT NAME F.A. Vitrano (Prepared by David Stewart) TELEPHONE NO. 915-685-5717

(This space for State Use)
APPROVED BY ORIGINAL SIGNED BY
MIKE WILLIAMS
SUPERVISOR, DISTRICT II TITLE DATE JAN 23 1990
CONDITIONS OF APPROVAL, IF ANY: