

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 87240
District II
811 South First, Artesia, NM 87210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

Form C-103
Revised March 25, 1999

SUNDARY 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.)		WELL API NO. 30-015-33089
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator OXY USA WTP Limited Partnership 192463		6. State Oil & Gas Lease No. 82613
3. Address of Operator P.O. Box 50250 Midland, TX 79710-0250		7. Lease Name or Unit Agreement Name: OXY Spumoni State
4. Well Location Unit Letter <u>P</u> : <u>900</u> feet from the <u>south</u> line and <u>990</u> feet from the <u>east</u> line Section <u>16</u> Township <u>17S</u> Range <u>31E</u> NMPM County <u>Eddy</u>		8. Well No. 1
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 3844'		9. Pool name or Wildcat Undsg. Fren Morrow
11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data		
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input checked="" type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/>		SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER: Amend TD <input checked="" 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

OXY requests that the TD for the OXY Spumoni State #1 be amended to 12150'

The APD was originally approved for a TD of 12000'

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

SIGNATURE David Stewart TITLE Sr. Regulatory Analyst DATE 1/28/04

Type or print name David Stewart

Telephone No. 432-685-5717

(This space for State use)

APPROVED BY James W. Green TITLE SUPERVISOR, DISTRICT II DATE JAN 28 2004
 Conditions of approval, if any: