RM

JUL 28 2009 Form C-103 Submit 3 Copies To Appropriate District State of New Mexico Office Energy, Minerals and Natural Resources May 27, 2004 District I WELL API NO. 1625 N. French Dr , Hobbs, NM 87240 30-015-31365 District II OIL CONSERVATION DIVISION 1301 W. Grand Ave., Artesia, NM 88210 5. Indicate Type of Lease 1220 South St. Francis Dr. District III STATE FEE X 1000 Rio Brazos Rd, Aztec, NM 87410 Santa Fe, NM 87505 District IV 6. State Oil & Gas Lease No. 1220 S St Francis Dr, Santa Fe, NM 87505 SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name: (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A Davis 18 DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 8. Well Number 1. Type of Well: Oil Well X Gas Well Other 9. OGRID Number 2. Name of Operator 16696 OXY USA Inc. 3. Address of Operator 10. Pool name or Wildcat P.O. Box 50250 Midland, TX 79710-0250 WC. Upper Penn 4. Well Location 660 660 north feet from the feet from the Unit Letter line and Township **20S** Range Eddy County 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 33341 Pit or Below-grade Tank Application or Closure Pit type ______ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water ___ Below-Grade Tank: Volume_____ _bbls; Construction Material _ Pit Liner Thickness: . 12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data **NOTICE OF INTENTION TO:** SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING COMMENCE DRILLING OPNS. PLUG AND X **TEMPORARILY ABANDON CHANGE PLANS ABANDONMENT PULL OR ALTER CASING** MULTIPLE CASING TEST AND **CEMENT JOB** COMPLETION OTHER: OTHER: 13. 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 recompletion. See Attachment I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or belowgrade tank has been/will be constructed or closed according to NMOCD guidelines ______, a general permit _____or an (attached) alternative OCD-approved plan _____ 7(23(09 Sr. Regulatory Analyst DATE SIGNATURE_ TITLE___ E-mail address: david stewart@oxy.com Type or print name David Stewart Telephone No. 432-685-5717 For State Use Only Approved for plugging of well bore only.

TITLE

APPROVED BY

Conditions of Approval, if any:

Liability under bond is retained pending receipt

which may be found at OCD Web Page under Forms, www.cmnrd.state.nm.us/ocd.

of C 103 (Subrequent Report of Well PluDAT)E



DATE	Remarks
7/6/09	RUPU, POOH W/ RODS & PUMP, NDWH, NU BOP, REL TAC, POOH W/ TBG
7/7/09	POOH W/ TBG, 298 JTS TOTAL. RUWL, RIH & SET 5-1/2" CIBP @ 8785', RIH W/ TBG TO @ 8785'
7/8/09	CIRCULATE W/ 10 PPG MUD LAIDEN FLUID, SPOT 25SX CMT ON CIBP @ 8785', CALC TOC @ 8560'
	PUH W/ TBG TO 7890', SPOT 25SX CMT, CALC TOC @ 7665'
	PUH W/ TBG TO 6062', SPOT 25SX CMT, CALC TOC @ 5837'
	PUH W/ TBG TO 4510', SPOT 25SX CMT, CALC TOC @ 4285'
	PUH TO 2965' SPOT 25SX CMT W/ 2% CACL2, WOC 3HRS. RIH W/ TBG, TAG CMT @ 2744'
•	PUH W/ TBG TO 1560', SPOT 25SX CMT, CALC TOC @ 1308'
	PUH W/ TBG TO 565', SPOT 25SX CMT. POOH, WOC
7/9/09	RIH W/ TBG, TAG CMT @ 322' , POOH, ND BOP, RIH W/ TBG TO 100', CIRCULATE 15SX CMT TO
	SURFACE. POOH, NDBOP, RDPU