. •		"					
Submit 3 Copies To Appropriate District	State of New Mexico						rm C-103
Office District I	Energy, Minerals and Natural Resources			Revised March 25, 1999 WELL API NO.			
1625 N. French Dr., Hobbs, NM 87240 District II	OIL CONSERVATION DIVISION			30-025-29587			
811 South First, Artesia, NM 87210 District III	2040 South Pacheco			5. Indicate Type of Lease			
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505			STATE I FEE			
2040 South Pacheco, Santa Fe, NM 87505				6. State Oil & Gas Lease No. 8910138170 - B1327			
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 X Gas Well Other				 Lease Name or Unit Agreement Name: Myers Langlie Mattix Unit 			
2. Name of Operator		*		8. Well No).		
OXY USA WTP Limited Partner	ship		192463	257			
3. Address of Operator P.O. Box 50250 Midland, TX	79710-0250				me or Wildo lattix 7Rvi		
4. Well Location						<u></u>	
Unit Letter <u>H</u> :	2630 feet from the	north	_ line and	50	feet from th	e <u>east</u>	line
Section 32	Township 23 10. Elevation (Show wh			NMPM c.)	C	County	Lea
11. Check	Appropriate Box to Ind	licate _l Natu	re of Notice,	Report, or	Other Da	ıta	
NOTICE OF INT				SEQUEN			
PERFORM REMEDIAL WORK	PLUG AND ABANDON		EDIAL WORK	-		LTERING C	ASING
	CHANGE PLANS	🗖 сом	MENCE DRILLI	ING OPNS.			
PULL OR ALTER CASING	MULTIPLE COMPLETION		NG TEST AND ENT JOB			BANDONME	-111
OTHER:			R: MIT - TA	Status			X
12. Describe Proposed or Complete of starting any proposed work). or recompilation.							
OXY USA WTP LP requests t	o temporarily abandon	this well	for possible	e future us	se.		
TD-3700' PBTD-3280'	Perfs-3370-3674'	CIBP-3320	l,		/	123456	789
1. Notify NMOCD of casing	integrity test 24hrs	in advance	·.		5	A	7897077
2. RU pump truck 2/11/04, to 520# for 30 min.	circulate well with t	reated wat	er, pressure	e test casi	ing 2728.293037	条字2 2 「んこうこ」、 Hobb	VED
	This Approval Abandonmen	l of Temp t Expires.	orary Z	11/09	ice i	100 1555355	.0.81
I hereby certify that the information above	e is true and complete to the b	est of my know	wledge and belief	f.			<u>·</u>
SIGNATURE		tit <u>le Sr.</u>	Regulatory A	<u>Analyst</u>	DA1	re 4(2	104
Type or print name David Stewart					Telephone I	No. 432-68	35-5717
(This space for State use)	1.1			• •			
APPROVED BY Hay W. L Conditions of approval, if any:	UMR OC	FRUGEREP	RESENTATIVE	II/STAFF M	ANAGAT	<u>APR 0 (</u>	} 2004 -

i.

