

Submit 1 Copy To Appropriate District Office
 District I - (575) 393-6161
 1625 N. French Dr., Hobbs, NM 88240
 District II - (575) 748-1283
 811 S. First St., Artesia, NM 88210
 District III - (505) 334-6178
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV - (505) 476-3460
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised August 1, 2011

HOBBS OCD
 MAR 21 2013

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

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.)		WELL API NO. 30-025-25945
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FBE <input checked="" type="checkbox"/>
2. Name of Operator OXY USA WTP Limited Partnership		6. State Oil & Gas Lease No.
3. Address of Operator P.O. Box 50250 Midland, TX 79710		7. Lease Name or Unit Agreement Name Myers Langlie Mattix Unit
4. Well Location Unit Letter <u>B</u> : <u>660</u> feet from the <u>North</u> line and <u>1980</u> feet from the <u>east</u> line Section <u>31</u> Township <u>23S</u> Range <u>37E</u> NMPM County <u>Lea</u>		8. Well Number <u>60</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <u>3366'</u>		9. OGRID Number 192463
10. Pool name or Wildcat <u>Langlie Mattix TRQUGB</u>		

12. 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 type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/>		SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input checked="" type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

3/13/13 MIRU, NDWH, NUBOP, RIH & tag Cmt/CIBP @ 3420', circ hole w/ 10# MLF, test csg held @ 400#. Spot 30sx CL C cmt, PUH, WOC. RIH & tag cmt @ 3115', PUH to 2850', spot 25sx CL C cmt, PUH, WOC.
 3/14/13 RIH & tag cmt @ 2642', PUH to 1300', spot 25sx CL C cmt, PUH, WOC. RIH & tag cmt @ 1064', PUH to 569', spot 60sx CL C cmt, circ to surf. RDPU.

Approved for plugging of well bore only.
 Liability under bond is retained pending receipt of C-103 (Subsequent Report of Well Plugging) which may be found at OCD Web Page under Forms, www.emnrd.state.nm.us/oed.

Spud Date:

Rig Release Date:

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

SIGNATURE David Stewart TITLE Regulatory Advisor DATE 3/15/13

Type or print name David Stewart E-mail address: david_stewart@oxy.com PHONE: 432-685-5717
 For State Use Only

APPROVED BY: [Signature] TITLE Dist. Mgr DATE 3-26-2013

Conditions of Approval (if any): RM
 MAR 28 2013