

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
HOBBS-OC
 JUN 18
OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

Form C-103
 Revised August 1, 2011

WELL API NO. 30-025-05832 ✓
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. E5553
7. Lease Name or Unit Agreement Name Fast Eumout Unit ✓
8. Well Number 93 ✓
9. OGRID Number 192463
10. Pool name or Wildcat Eumout Yates TRQN
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3584'

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 Injection-TA

2. Name of Operator
OXY USA WTP Limited Partnership

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

4. Well Location
Unit Letter G : 1980 feet from the North line and 2310 feet from the east line
Section 35 Township 19S Range 37E NMPM County Lea

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> OTHER: <input type="checkbox"/>	SUBSEQUENT REPORT OF: PLUG AND ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> OTHER: <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: <u>MIT TA</u> <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/> P AND A <input type="checkbox"/>
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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.

TD- 4050' PBD- 3748' Perfs- 3798-3865' ^{CBP} PKR 3748'

- Notified NMOCD of casing integrity test 24hrs in advance.
- RU pump truck 57113, circulate well with treated water, pressure test casing to 510 # for 30 min.

This Approval of Temporary Abandonment Expires 6-23-2014

Spud Date:

Rig Release Date:

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

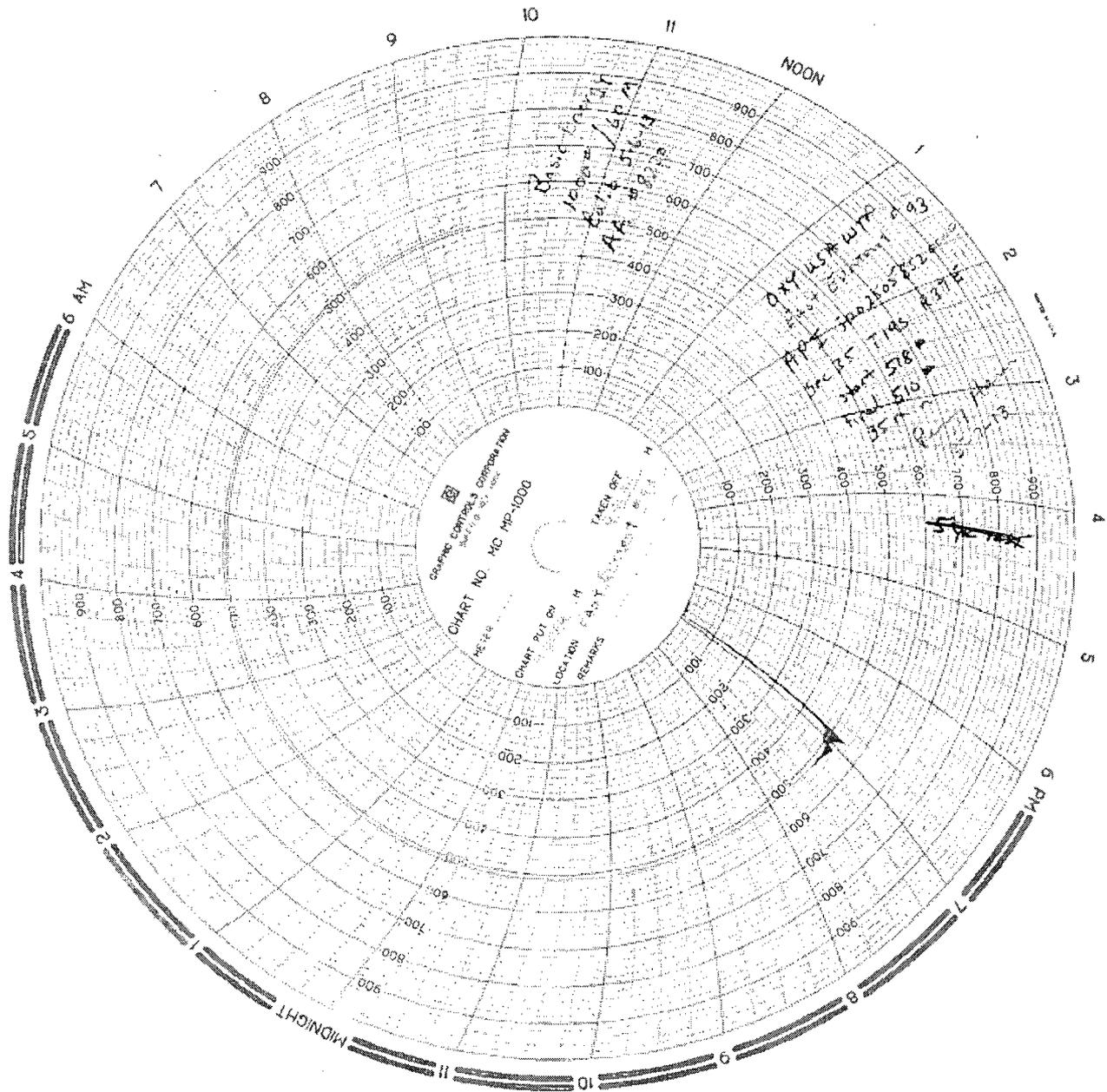
SIGNATURE David Stewart TITLE Regulatory Advisor DATE 6/18/13

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 6-24-2013

Conditions of Approval (if any):

JUN 25 2013



Rec. Mid Res 6/7/63