

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  
 HOBBS OFFICE, Minerals and Natural Resources  
 JUL 10 2013  
 OIL CONSERVATION DIVISION  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505  
 RECEIVED

Form C-103  
 Revised August 1, 2011

WELL API NO. 30-025-05862 ✓
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 32656
7. Lease Name or Unit Agreement Name East Eumout Unit ✓
8. Well Number 116 ✓
9. OGRID Number 192463
10. Pool name or Wildcat Eumout Yates TRQN ✓
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3607'

**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

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 J : 1980 feet from the South line and 1980 feet from the east line  
 Section 2 Township 20S Range 37E NMPM County Lea

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

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

OXY USA WTP LP respectfully requests a 1 year extension on the temporary abandonment of this well for further evaluation of the waterflood unit. OXY is in the process of submitting drilling permits to carry out a project that includes revitalizing the northern portion of the unit and testing potential in the southern portion of the unit. The project entails drilling 4 new wells in 2013 and the APDs for these are currently being prepared. These wells will decrease the primary production spacing from 40 acre to 20 acre spacing. Along with the newly drilled well, the wells in the immediately surrounding area will be worked over. There will be 5 producing wells re-stimulated with more appropriate completions for the reservoir and 5 injection wells will be cleaned out and stimulated to ensure sufficient flooding. In the South portion of the field, Oxy has identified 4 test wells to recomplete in new zones and evaluate the potential of the inactive portion of the field. From the results of the project, Oxy will evaluate and determine the potential reactivation of this well.

TD- 3850 PBTD- 3647 Perfs- 3699-3825 CIBP- 3647

1. Notified NMOCD of casing integrity test 24hrs in advance.
2. RU pump truck 71913, circulate well with treated water, pressure test casing to 540 # for 30 min.

Spud Date:  Rig Release Date:

This Approval of Temporary Abandonment Expires 7-9-2014

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 7/10/13

Type or print name David Stewart E-mail address: david\_stewart@oxy.com PHONE: 432-685-5717

APPROVED BY [Signature] TITLE Dist. Mgr DATE 7-11-2013

Conditions of Approval (if any):  
 JUL 11 2013

RECEIVED

JUL 10 2013

HOBBSOCD

