Submit I Copy To Appropriate District Office	State of New I			Form C-103
<u>District I</u> - (575) 393-6161	Energy, Minerals and Na	atural Resources	WELLADING	Revised July 18, 2013
1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283			WELL API NO. 30-025-05700	,
811 S. First St., Artesia, NM 88210 OIL CONSERVATION DIVISION			5. Indicate Type of Le	
			STATE STATE	FEE 🗌
Santa Fe NM X/505			6. State Oil & Gas Lea	ase No.
1220 S. St. Francis Dr., Santa Fe, MAY 21 87505	Luit		B2461	
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or Uni	
(DO NOT USE THIS FORM FOR PROPOSED DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "AIR CATION FOR PERMIT" (FORM C-101) FOR SUCH			East Eumon	,
PROPOSALS.)				T Wai I
1. Type of Well: Oil Well Gas Well Other			8. Well Number 63	
2. Name of Operator			9. OGRID Number	
OXY USA WTP Limited Partnership 3. Address of Operator			192463 10. Pool name or Wildcat	
P.O. Box 50250 Midland, TX 79710				
4. Well Location			Eumont Yates	· JRWA
	660 feet from the Nov	th line and	1-1-0 fact from the	west line
Section 27 Township (S Range 3 TE NMPM County Lease 11. Elevation (Show whether DR, RKB, RT, GR, etc.)				
	36(1			
The Property of the Control of the C			(40.65.5.3.5.4.46.5.5.5.6.5.6.5.6.5.6.5.6.5.6.5.6.	And the last times of the last
12. Check Ap	propriate Box to Indicate	Nature of Notice.	Report or Other Data	a
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NOTICE OF INT		ı	SEQUENT REPOR	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR				
TEMPORARILY ABANDON			ND A	
DOWNHOLE COMMINGLE	MULTIPLE COMPL	CASING/CEMEN	11 306 []	
CLOSED-LOOP SYSTEM				
OTHER:		OTHER:		
 Describe proposed or complet of starting any proposed work proposed completion or recon). SEE RULE 19.15.7.14 NM.			
75sx CL C cmt, SIP-4 5/15/2014 RIH & tag cmt @ 180' or rate. Rel pkr, POO	95', circ hole w/ 10# MLF, MPUH, WOC. 7'. PUH to 1601', M&P 30s» I & perf @ 474', RIH & set p 00#, WOC, Mark Whitaker-I	c CI C cmt w/ 2% Ca kr @ 30', EIR @ 1B NMOCD approved c 80', RIH & perf @ 18	aCl2, POOH, WOC. RI BPM @ 100# w/ no retui change B0', pressure up to 500#	H & tag cmt rns, M&P # w/ no loss
Spud Date:	Rig Release	Date:		
I hereby certify that the information ab-	ove is true and complete to the	best of my knowledg	ge and belief.	
	•			
SIGNATURE WAS COME			D 4 mm 4	
SIGNATURE // STATE	TITLE	Sr. Regulatory Advis	orDATE	5/19/14
Type or print nameDavid Stewart	E-mail addres	s: <u>david stewart</u>	@oxy.com PHONE:	_432-685-5717
For State Use Only	7 .	. 1 /		/ 1 /
APPROVED BY: Walky Stown TITLE Dist. Suphrison DATE 5/22/2014				
Conditions of Approval (if any)	r	•	MAY 2 2 201	Pochy
			INTER PER	P