

FILE IN TRIPLICATE

OIL CONSERVATION DIVISION

DISTRICT I
1625 N. French Dr., Hobbs, NM 88240

1220 South St. Francis Dr.
Santa Fe, NM 87505

HOBBS OCD

DISTRICT II
1301 W. Grand Ave, Artesia, NM 88210

SEP 10 2014

DISTRICT III
1000 Rio Brazos Rd, Aztec, NM 87410

WELL API NO. 30-025-07542
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name State Land Section 32
8. Well No. 8
9. OGRID No. 16696
10. Pool name or Wildcat Bowers 7 Rivers

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.)

RECEIVED

1. Type of Well: Oil Well Gas Well Other Temporarily Abandoned

2. Name of Operator
Oxy USA, Ltd.

3. Address of Operator
HCR 1 Box 90 Denver City, TX 79323

4. Well Location
Unit Letter I : 1980 Feet From The South 660 Feet From The East Line
Section 32 Township 18-S Range 38-E NMPM Lea County

11. Elevation (Show whether DF, RKB, RT GR, etc.)
3637' GR

Pit or Below-grade Tank Application or Closure
Pit Type _____ Depth of Ground Water _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____
Pit Liner Thickness _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

12. Check Appropriate Description Nature of Notice, Report, or Other Data

E-PERMITTING	SUBSEQUENT REPORT OF:
P P&A NR _____ P&A R _____	REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/>
TI INT TO P&A _____	COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG & ABANDONMENT <input type="checkbox"/>
P CSNG _____ CHG Loc <u>CHG</u>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
O TA <u>P-M</u> RBDMS CHART <u>CHG</u>	OTHER: <u>Casing integrity test/TA status 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Date of test: 08/25/2014 ✓

Pressure readings: Initial – 520 PSI; 15m in – 520 PSI; 30 min – 520 PSI

Length of test: 30 minutes

Witnessed: NO

CIBP @3050'
Open Hole perms @3124-3192'

This Approval of Temporary Abandonment Expires 8/29/2015 ✓

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan

SIGNATURE Mendy A Johnson TITLE Administrative Associate DATE 09/09/2014

TYPE OR PRINT NAME Mendy A. Johnson E-mail address: mendy_johnson@oxy.com TELEPHONE NO. 806-592-6280

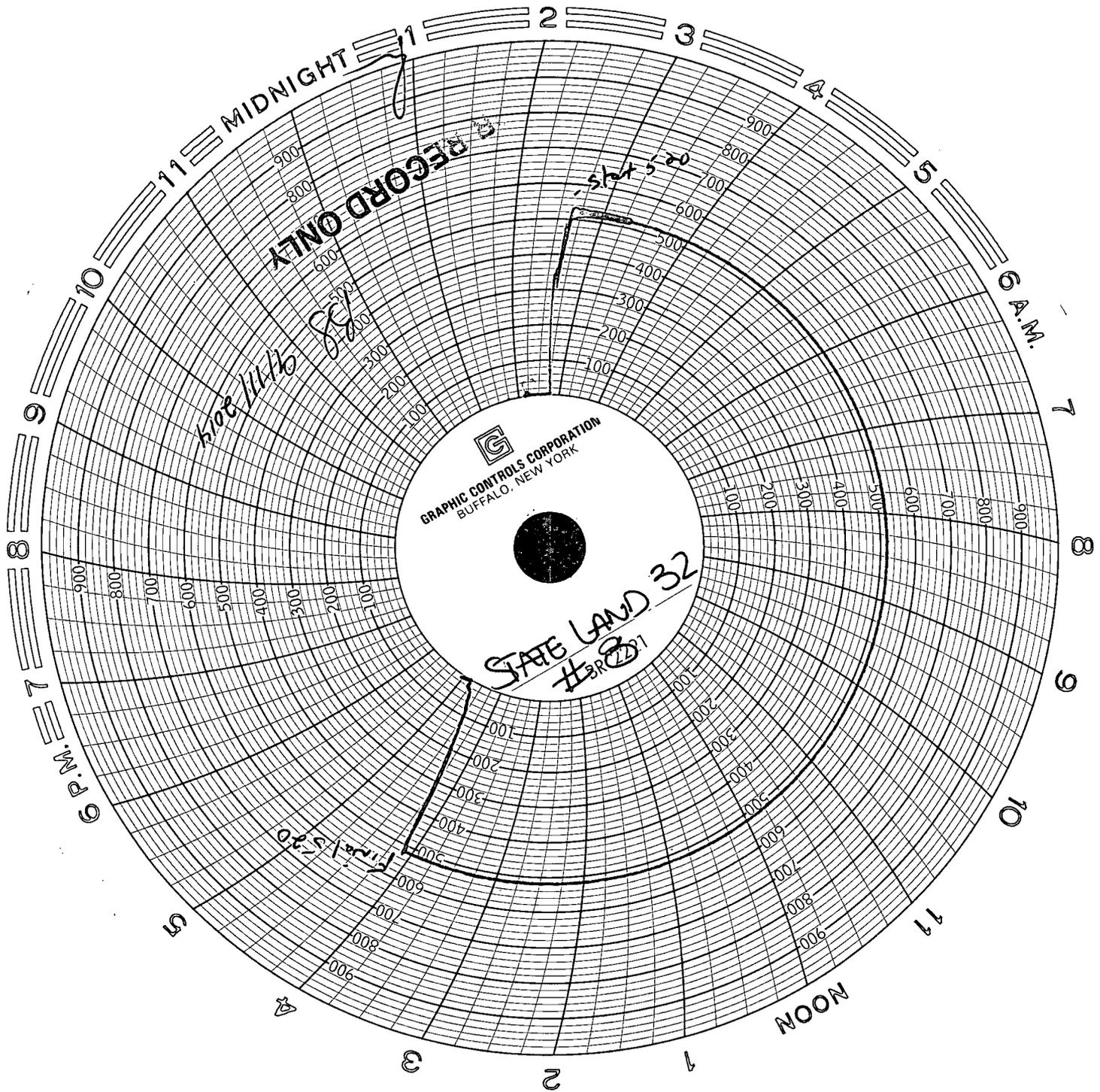
For State Use Only

APPROVED BY Bill Senamab TITLE Staff Manager DATE 9/11/2014

CONDITIONS OF APPROVAL IF ANY:

OR RECORD ONLY

SEP 17 2014 *[Signature]*



RECORD ONLY

GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK

STATE LAND 32
BR 27

500-11/16

500-11/16

NOON

6 A.M.

6 P.M.

MIDNIGHT

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