Submit 3 Copies To Appropriate District Office	State of New Me		Form C-103
District I	Energy, Minerals and Natur	rai Resources	May 27, 2004 WELL API NO.
1625 N. French Dr., Hobbs, NM 87240 District II	OIL CONSERVATION	NOIVISION	30-025- OSBUL
1301 W. Grand Ave., Artesia, NM 88210 District III	1220 South St. Fra		5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 8	7505	STATE 🔀 FEE 🔀
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505			6. State Oil & Gas Lease No.
SUNDRY NOTICE	ES AND REPORTS ON WEL	LS	7. Lease Name or Unit Agreement Name:
(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.)			East Eumont Unit
1. Type of Well:			8. Well Number
Oil Well Gas Well G	Other Injection		89
2. Name of Operator OXY USA WTP Limited Partner	nchin		9. OGRID Number
3. Address of Operator	Sillb		l ペスソるる 10. Pool name or Wildcat
P.O. Box 50250 Midland, T	X 79710-0250		Eumont Yates 7Rvr Qn
4. Well Location			
Unit Letter A : L	feet from the wa	th line and	188 feet from the east line
Section 35	Township t95	Range 37E	NMPM County Lea
11. Elevation (Show whether DR, RKB, RT, GR, etc.)			
Pit or Below-grade Tank Application or Closure			
Pit type Depth to Groundwater Distance from nearest fresh water well Distance from nearest surface water			
Pit Liner Thickness: mil Below-Grade Tank: Volumebbls; Construction Material			
TEMPORARILY ABANDON	PLUG AND ABANDON CHANGE PLANS	REMEDIAL WORK COMMENCE DRILLI	ABAND ON MENT (*)
PULL OR ALTER CASING	MULTIPLE COMPLETION	CASING TEST AND CEMENT JOB	005
OTHER:		OTHER: CIT - TA	Status X
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. 0XY USA WTP LP requests to temporarily abandon this well for possible future use.			
	requests to temporarily a	bandon this well f	or possible future use.
TD- <u>3950'</u>	PBTD- <u>ኝጓ</u> ረገ Per	fs- <u>3752-3665</u>	Pkr/ CIBP -3724
1. Notify BLM/NMOCD of casing integrity test 24hrs in advance. 2. RU pump truck 10505, circulate well with treated water, pressure test casing to 620 # for 30 min.			
10 <u>640</u>	_# TOP 30 min.	This	Approval of Temporary
XI I I I I I I I I I I I I I I I I I I		Abai	ndonment Expires/0/3/10
grade tank has been/will be constructed or cl	ove is true and complete to the osed according to NMOCD guideling	best of my knowledge s . a general permit	and belief. I further certify that any pit or below- or an (attached) alternative OCD-approved plan
SIGNATURE	TIT	LE Sr. Regulat	tory Analyst DATE 11/14/05
Type or print name David Stewart	E-r	nail address:	Telephone No. 915-685-5717
For State Use Only		OC FIELD REDUCE	•
APPROVED BY	LUNK TO	TLE	SENTATIVE II/STAFF MANAGER 1 7 2006
Conditions of Approval, if any			

