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Submit 3 Copies To Appropriate District Office	State of New Mexico Energy, Minerals and Natural Resources				Form C-103 Revised March 25, 1999					
District 1 1625 N. French Dr., Hobbs, NM 87240	Energy, minorais and reacting resources				WELL API NO.					
District II	OIL CONSERVATION DIVISION				30-025-09472					
811 South First, Artesia, NM 87210 District III	2040 South Pacheco				5. Indicate Type of Lease					
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505				STATE X FEE					
District IV 2040 South Pacheco, Santa Fe, NM 87505					6. State Oil & Gas Lease No. B1431					
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:					7. Lease Name or Unit Agreement Name: Myers Langlie Mattix Unit					
Oil Well X Gas Well Other										
2. Name of Operator						8. Well No.				
OXY USA WTP Limited Partnership 192463						67 9. Pool name or Wildcat				
3. Address of Operator   P.O. Box 50250 Midland, TX 79710-0250   4. Well Location						Langlie Mattix 7Rvr Qn-GB				
Unit Letter E:	1980 feet from the	north	line an	id66	0 fe	et from t	he <u>we</u>	stli	ne	
Section 36	Township 23	S Ra	nge 36	E N	MPM		County	Lea		
	10. Elevation (Show wh			GR, etc.)						
11. Check A	Appropriate Box to Ind	icate <sub>1</sub> N	ature of No	otice, Rep	port, or (	Other D	ata			
	ENTION TO: PLUG AND ABANDON		EMEDIAL W	SUBSE ORK	QUENT		ORT OF:			
	CHANGE PLANS			ORILLING	OPNS.		PLUG AN	) 		
PULL OR ALTER CASING	MULTIPLE COMPLETION		ASING TEST EMENT JOB				ABANDON	IMENI		
OTHER:			THER: MIT	- TA Sta	tus				X	
<ul><li>12. Describe Proposed or Complete of starting any proposed work). or recompilation.</li><li>OXY USA WTP LP requests to</li></ul>	SEE RULE 1103. For Mu	iltiple Co	ompletions: A	Attach well	lbore diag	ram of p				
TD-3604' PBTD-3350'	Perfs-3450-3604'	CIBP-3	3385 '				031-			
1. Notify BLM/NMOCD of ca	sing integrity test 24	lhrs in	advance.			e e e e e e e e e e e e e e e e e e e	33.			
2. RU pump truck 7/29/03, to 540# for 30 min.	circulate well with t This Approva Abandonment	عا مح	97		st casin	g 22225	1- 4000	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		
I hereby certify that the information above	is true and complete to the b	est of my	knowledge an	d belief.			~		—	
SIGNATURE		TITLE_	<u>Sr. Regula</u>	tory Anal	yst	DA	TE -9(4	(03	_	
Type or print name David Stewart					T	elephone	No. 432	-685-5717	7	
(This space for State use) APPROVED BY Conditions of approval if any:	Illiam OCD	ISTRICT	SUPERVISO	R/GENER	AL MANA	GEDAT	te <b>sep</b> ()	9 2003	_	

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