State of New Mexico Form C-103 Submit 3 Copies To Appropriate District Office Energy, Minerals and Natural Resources Revised March 25, 1999 District I WELL API NO. 1625 N. French Dr., Hobbs, NM 87240 30-025-10975 District II OIL CONSERVATION DIVISION 811 South First, Artesia, NM 87210 5. Indicate Type of Lease 2040 South Pacheco District III STATE X FEE 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 District IV 6. State Oil & Gas Lease No. 2040 South Pacheco, Santa Fe, NM 87505 B9974 SUNDRY NOTICES AND REPORTS ON WELLS 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.) Myers Langlie Mattix Unit 1. Type of Well: Oil Well Gas Well Other Injection 8. Well No. 2. Name of Operator OXY USA WTP Limited Partnership 192463 3. Address of Operator 9. Pool name or Wildcat P.O. Box 50250 Midland, TX 79710-0250 Langlie Mattix 7Rvr Qn-GB 4. Well Location 660 south Unit Letter feet from the line and feet from the line Township 245 **NMPM** County Lea Section Range 10. Elevation (Show whether DR, RKB, RT, GR, etc.) 11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK **ALTERING CASING** PLUG AND ABANDON REMEDIAL WORK **TEMPORARILY ABANDON CHANGE PLANS** COMMENCE DRILLING OPNS. **PLUG AND** ABANDONMENT **PULL OR ALTER CASING MULTIPLE CASING TEST AND** COMPLETION CEMENT JOB  $\square$ OTHER: OTHER: MIT - TA Status 12. 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 recompilation. OXY USA WTP LP requests to temporarily abandon this well for possible future use. TD-3725' PBTD-3365' Perfs-3530-3630' CIBP-3365' 1. Notify BLM/NMOCD of casing integrity test 24hrs in advance. 2. RU pump truck 7/29/03, circulate well with treated water, pressure test casing to 520# for 30 min. This Approval of Temporary Abandonment Expires I hereby certify that the information above is true and complete to the best of my knowledge and belief. TITLE Sr. Regulatory Analyst SIGNATURE\_ DATE Type or print name David Stewart Telephone No. 432-685-5717

OC DISTRICT SUPERVISOR/GENERAL MANAGER TE

APPROVED BY Conditions of approval, if any:

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