Submit 3 Copies To Appropriate District State of New Mexico Form C-103 Office Energy, Minerals and Natural Resources May 27, 2004 District I WELL API NO. 1625 N. French Dr., Hobbs, NM 87240 30-025-05701 District II OIL CONSERVATION DIVISION 1301 W Grand Ave., Artesia, NM 88210 5. Indicate Type of Lease 1220 South St. Francis Dr. District III 1000 Rio Brazos Rd., Aztec, NM 87410 STATE X Santa Fe, NM 87505 FEE \square District IV 6. State Oil & Gas Lease No. 1220 S St. Francis Dr., Santa Fe, NM 87505 132461 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 East Eumont Unit DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 8. Well Number 1. Type of Well: Oil Well Gas Well Other 2. Name of Operator 9. OGRID Number OXY USA WTP Limited Partnership 192463 3. Address of Operator 10. Pool name or Wildcat P.O. Box 50250 Midland, TX 79710-0250 Eumont Yates 7Rvr Qn 4. Well Location Unit Letter feet from the Worth line and 1980 feet from the west Township 195 Range 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: . Below-Grade Tank: Volume_____ _bbls; Construction Material 12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK **TEMPORARILY ABANDON CHANGE PLANS** COMMENCE DRILLING OPNS. [PULL OR ALTER CASING MULTIPLE CASING TEST AND COMPLETION **CEMENT JOB** OTHER: OTHER: CIT - TA Status \square 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. OXY USA WTP LP requests to temporarily abandon this well for possible future use. TD- 3975 PBTD- 3885' Perfs-3529-3672 Pkr/CIBP- 3703' 1. Notify NMOCD of casing integrity test 24hrs in advance. 2. RU pump truck \(\frac{\gamma\lambda(\one\sigma)}{\sigma}\), circulate well with treated water, pressure test casing to _560 # 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. I further certify that any pit or belowgrade tank has been/will be constructed or closed according to NMOCD guidelines ______, a general permit _____or an (attached) alternative OCD-approved plan _____ Sr. Regulatory Analyst DATE SIGNATURE. 7(15(07 TITLE___ E-mail address: Type or print name David Stewart Telephone No. 432-685-5717 OC FIELD REPRESENTATIVE II/STAFF MAMARIAN Conditions of Approval, if any:

