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 District II <u>30-025</u>- ス**つろ**てら 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 Santa Fe, NM 87505 FEE 🗷 District IV 6. State Oil & Gas Lease No. 1220 S St. Francis Dr., Santa Fe, NM 87505 8910138170 -SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name: (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEED Myers Langlie Mattix Unit DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORMICE OF SECTION FOR PERMIT" PROPOSALS.) 1. Type of Well: 8. Well Number Oil Well A Gas Well Other MAR n 4 2008 12 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 Langlie Mattix 7Rvr On-GB 4. Well Location Unit Letter 1930 feet from the North line and 660 feet from the line Section Township 235 Range 36E **NMPM** 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 OF: REMEDIAL WORK PERFORM REMEDIAL WORK PLUG AND ABANDON I ALTERING CASING **TEMPORARILY ABANDON CHANGE PLANS** COMMENCE DRILLING OPNS. PLUG AND **ABANDONMENT** PULL OR ALTER CASING MULTIPLE CASING TEST AND This 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- 3755 PBTD- 3327 Perfs-3438-3717 -Pkr/CIBP- 3363 1. Notify BLM/NMOCD of casing integrity test 24hrs in advance. 2. RU pump truck 2/27/09, circulate well with treated water, pressure test casing to **40** # for 30 min. I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pittor belowgrade tank has been/will be constructed or closed according to NMOCD guidelines ______, a general permit _____or an (attached) alternative OCD-approved plan _____ SIGNATURE_ Sr. Regulatory Analyst _DATE_3(7(108 __TITLE___ E-mail address: Type or print name David Stewart Telephone No. 432-685-5717 For State Use Only OC DISTRICT SUPERVISOR/GENERAL MANAGER _____DATE _'MAR 0 6 2008 APPROVED BY _ TITLE_

Conditions of Approval, if any:

