Submit 3 Copies To Appropriate District Office State of New Mexico Minerals and Natural Resources	Form C-103
District I	WELL API NO.
1625 N. French Dr., Hobbs, NM 87240 District II 1301 W. Grand Ave., Artesia, NM 642102 3 2001L CONSERVATION DIVISION 1220 South St. Francis Dr.	30-025-27596
District III	5. Indicate Type of Lease STATE X FEE
1000 Rio Brazos Rd., Aztec, PAGESOCD Santa Fe, NM 87505 District IV	STATE X FEE 6. State Oil & Gas Lease No.
1220 S. St. Francis Dr , Santa Fe, NM 87505	V-3526
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.)	7. Lease Name or Unit Agreement Name: Red Tank 30 State
1. Type of Well: Oil Well	8. Well Number
2. Name of Operator OXY USA Inc.	9. OGRID Number 16696
3. Address of Operator	10. Pool name or Wildcat
P.O. Box 50250 Midland, TX 79710-0250	Bootleg Ridge Delaware
4. Well Location	
Unit Letter H: 1980 feet from the north line and	660 feet from the east line
Section 30 Township 22S Range 33E	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	
12. Check Appropriate Box to Indicate Nature of Notice NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WORK	BSEQUENT REPORT OF:
TEMPORARILY ABANDON X CHANGE PLANS COMMENCE DRIL	LING OPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING	
OTHER: OTHER:	
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 Inc requests to temporarily abandon this well for possible future use. The well is currently being evaluated for possible SWD.	
1. Notify NMOCD of casing integrity test 24hrs in advance.	
2. RU pump truck, circulate well with treated water, pressure test casing to 500# for 30 min. Condition of Approval: Notify OCD Hobbs	
CIBP @ RBP IS to be < 100' top perts. of	fice 24 hours prior to running MIT Test & Chart
I hereby certify that the information above is true and complete to the best of my knowned and c	
SIGNATURE TITLE Sr. Regulatory Analyst DATE 1/22/09	
Type or print name David Stewart E-mail address: david_stewart@oxy.com Telephone No. 432-685-5717	
APPROVED BY AMALU. DISTRICT 1 SUPERVISOR DATE	
	1 SUPERVISOR