Submit 3 Copies To Appropriate District Office District I State of New Mexico Minerals and Natural Resources	Form C-103 May 27, 2004
LOGAN E. A. D. H. H. AD COMAIN	WELL API NO.
District II FER 1 Q ARTICONICED VATIONI DIVISIONI	30-025- 11000
District III 1000 Rio Brazos Rd., Aztec, NM 8740BBSOC1220 South St. Francis Dr. Santa Fe, NM 87505 District IV	5. Indicate Type of Lease STATE FEE
1000 Rio Brazos Rd., Aztec, NM 8741010000 Santa Fe, NM 87505 District IV.	
1220 S. St. Francis Dr., Santa Fe, NM 87505	6. State Oil & Gas Lease No. 8910138170 -
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: Myers Langlie Mattix Unit
1. Type of Well: Oil Well Gas Well Other	8. Well Number
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 4. Well Location	Langlie Mattix 7Rvr Qn-GB
Unit Letter H: 1980 feet from the Worth line and 660 feet from the east line	
Unit Letter H: 1980 feet from the North line and	Get from the East line
Section 4 Township 245 Range 37 E	NMPM County Lea
11. Elevation (Show whether DR, RKB, RT, GR, et	c.)
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	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILE CARROLLE DRILE CAR	SEQUENT REPORT OF: ALTERING CASING OPNS. PLUG AND ABANDONMENT
OTHER: MIT - TA Status	34,04
OTHER: MIT - TA Status IX	
TD- <u>3701</u> PBTD- <u>3400</u> Perfs- <u>3459-3456</u> Pkm/CIBP- <u>3400</u>	
1. Notify BLM/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.	
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 below-grade tank has been/will be constructed or closed according to NMOCD guidelines, a general permit or an (attached) alternative OCD-approved plan	
SIGNATURE TITLE Sr. Regulatory Analyst DATE 2(18)09	
Type or print name David Stewart E-mail address: Telephone No. 432-685-5717	
APPROVED BY	
Conditions of Approval, if any:	