Submit 3 Copies To Appropriate District Office District I State of New Mexico RECEN	Form C-103 May 27, 2004
MAR 11 M 1	MOMENTA DINIO
District III 1301 W. Grand Ave., Artesia, NM 88210 District III 1000 Rio Brazos Rd. Aztec, NM 87410 Sonta Fo. NM 87505	30-025-01294 MS The dicate Type of Lease
District III TUBBIQEOUS St. Francis Dr. 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe. NM 87505	STATE X FEE \(\)
District IV.	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr , Santa Fe, NM 87505	E-1388
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: Vickers State
1. Type of Well: Oil Well X Gas Well Other	8. Well Number
2. Name of Operator	9. OGRID Number
OXY USA Inc.	16696
3. Address of Operator	10. Pool name or Wildcat
P.O. Box 50250 Midland, TX 79710-0250	Maljamar Grayburg San Andres
4. Well Location	
Unit Letter M: 330 feet from the south line and	330 feet from the west line
Section 4 Township 17S Range 33E	NMPM County Lea
11. Elevation (Show whether DR, RKB, RT, GR, etc. 4203' GR	.)
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; Constructio	
12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT PULL OR ALTER CASING MULTIPLE COMPLETION CASING TEST AND CEMENT JOB OTHER: Run MIT 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. TD; 4550' PBTD-4300' Perfs-4348-4400' CIBP-4300'. OXY USA Inc requests to temporarily abandon this well for possible future use, this well is currently being evaluated. Condition of Approval: Notify OCD Hobbs office 24 hours prior to running MIT Test & Chart	
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 515109 E-mail address: david_stewart@oxy.com Type or print name David Stewart Telephone No. 432-685-5717	
For State Use Only	
OLETPICT 1 S	UPERVISOR WAY 1 1 2009
APPROVED BY TITLE TITLE Conditions of Approval, if any:	DATE

OXY USA Inc. Vickers State #1 API No. 30-025-01294

