Submit 1 Copy To Appropriate District Office	State of New			Form C-103
Energy Minerals and Natural Resources			WELL API NO. /	October 13, 2009
1625 N French Dr., Hobbs, NMR CELUD CONSERVATION DIVISION 1301 W Grand Ave., Artesia, NM 88210 District III 1301 South St. Francis Dr. 1220 South St. Francis Dr.			30-025-20910 V	
District III 1000 Rto Brazos Rd, Aztec, NM 8001 15 2010 Santa Fe. NM 87505			5. Indicate Type of L	ease FEE
			6. State Oil & Gas Le	ase No.
1220 S St Francis Dr., Santa Fe, MOBBSOCD 87505			E-0789-1	
SUNDRY NOTION (DO NOT USE THIS FORM FOR PROPOS.	CES AND REPORTS ON WE		7. Lease Name or Un	it Agreement Name
DIFFERENT RESERVOIR USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH			Monsanto State	· , _
PROPOSALS) 1. Type of Well: Oil Well Gas Well Other			8. Well Number 007	
2. Name of Operator			9. OGRID Number	16696 1
Oxy USA WTP 3. Address of Operator			10. Pool name or Wil	dcat
4008 N. Grimes PMB 269, Hobbs NM 88240			Paduca De	laware -
4. Well Location				
Unit Letter_M :330feet from theSouth line and990feet from theWest line \/ Section 16 Township 25s Range 32e NMPM County Lea				
Section 16 Township 23s Range 32e NWFW County Lea 11. Elevation (Show whether DR, RKB, RT, GR, etc.)				
12 Charle A	Dan ta Indiae	ta Natura af Natica	Damant on Othan Day	ta
12. Check A	ppropriate Box to Indica	te Nature of Notice,	Report or Other Da	ia
NOTICE OF INT		i i	SEQUENT REPO	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PAND A				TERING CASING ND A
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT		
DOWNHOLE COMMINGLE			•	
OTHER:		OTHER: Location	ıs ready for OCD inspe	ection after P&A
All pits have been remediated in a	compliance with OCD rules ar	d the terms of the Opera	ntor's pit permit and clos	ure plan.
Rat hole and cellar have been filled and leveled. Cathodic protection holes have been properly abandoned.				
A steel marker at least 4" in diameter and at least 4' above ground level has been set in concrete It shows the. OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, QUARTER/QUARTER LOCATION OR				
UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. ALL INFORMATION HAS BEEN WELDED OR PERMANTENTLY STAMPED ON THE MARKER'S SURFACE.				
The location has been leveled as nearly as possible to original ground contour and has been cleared of all junk, trash, flow lines and				
other production equipment. Anchors, dead men, tie downs and risers have been cut off at least two feet below ground level.				
If this is a one-well lease or last remaining well on lease, the battery and pit location(s) have been remediated in compliance with				
OCD rules and the terms of the Operator's pit permit and closure plan. All flow lines, production equipment and junk have been removed from lease and well location.				
All metal bolts and other materials have been removed. Portable bases have been removed. (Poured onsite concrete bases do not				
have to be removed.) All other environmental concerns have been addressed as per OCD rules.				
Pipelines and flow lines have bee non-retrieved flow lines and pipeli		vith 19.15 9 714.B(4)(b) i	NMAC. All fluids have b	een removed form
• •				
When all work has been completed, return this form to the appropriate District office to schedule and inspection .				
SIGNATURE JAMES	TITLE	HES Specialist	DATE	10-13-2060
		•		
Type or print name Dusty L. Wils For State Use Only	on E-mail addr	ess: <u>dusty_wilson@ox</u>	y.com PHONE: _	(575) 397-8247
APPROVED BY: Wash Whiteham TITLE Compliance Officer DATE 10/20/2010 Conditions of Approval (if any):				
conditions of Experioral (it airy).		,		