Submit 3 Copies to Appropriate **District Office** <u>District l</u> P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

i oi iii o-	103
Revised	1-1-89

ELL API NO.	30	- 025	- 05530
. Indicate Type of L	ease S	TATE X] FEE [

District II	P.O. Box 2088			30 - 025 - 05530
P.O.Drawer DD, Artesia, NM 88210 Santa Fe, New Mexico 87504-2088		5. Indicate Type of L	ease STATE X FEE	
<u>District III</u> 1000RioBrazos Rd.Aztec,NM87410			6. State Oil & Gas Le	
			E-8569	ease No.
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 Un	it agreement Name
1. Type of Well: OIL GAS WELL WELL	OTHER INJE	CTION	EAST EUMON	T UNIT
Name of Operator OXY USA INC.			8. Well No. 9	
3. Address of Operator	Aidland TV 70740		9. Pool name or Wild	cat
P.O. Box 50250 M	1101ano, 1X 79710		EUMONT YA	TES SVN RVR QN
0 660	From The SOUTH	Line and1,650	Feet From T	he <u>EAST</u> Line
Section 33 Tow	mship 18 S R	_{ange} 37 E	NMPM LE	A County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3,705				
	riate Box to Indicate Na	ture of Notice, Repor	t, or Other Data	a
NOTICE OF INTENTION TO: SUBSE			QUENT REF	PORT OF:
PERFORM REMEDIAL WORK PLU	JG AND ABANDON	REMEDIAL WORK	X ALT	ERING CASING
TEMPORARILY ABANDON CH	IANGE PLANS	COMMENCE DRILLING	OPNS. PLU	G AND ABANDONMENT
PULL OR ALTER CASING	i	CASING TEST AND CEMI	ENT JOB	
OTHER:		OTHER: CONVERT TO	O INJECTION	X
12.Describe Proposed orCompleted Operations (Clearly state all pertinent details, and give pertinent dates, ncluding estimated date of starting any proposed				

work) SEE RULE 1103.

TD - 4096'

PBTD - 4070'

PERFS - 3799' - 3962'

MIRU PU, 12/6/93, NDWH NUBOP, RIH & TAG @ 4043', CO TO 4070'. PERF ADD'L INTERVAL W/ 2SPF @ 3799-3810, 21-29, 37-41, 62-67, 79-89, 94-3904' TOTAL 108 HOLES. ACIDIZE W/ 5000GAL 15% NEFE HCL ACID. POOH. RIH W/ GUIB G-6 PKR & 2-3/8" TBG & SET PKR @ 3726', NDBOP, NUWH, CIRC W/ PKR FLUID, TEST CSG TO 320#, RDPU 12/9/93. PUT WELL ON INJECTION 3/21/94 @ 197BWPD @ 0#.

R-290	21-A					
I hereby certify that the information above is true and complete to the best of my knowledge and belief.						
SIGNATURE	andlat	TITLE _	REGULATORY ANALYST	DATE 09 16 94		
TYPE OR PRINT NAME	DAVID STEWART			TELEPHONE NO. 915 685-5717		
(This space for State Use)	Maggiore de la company de la c	6.7		SEP 2 0 1994		
APPROVED BY		TITLE _		DATE		
CONDITIONS OF APPROV	'AL IF ANY:			2		