

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPL
(Other instructions
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Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

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—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Temporarily Abandoned		5. LEASE DESIGNATION AND SERIAL NO. NM 26884-A
2. NAME OF OPERATOR OXY USA Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P. O. Box 50250, Midland, TX 79710		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 2310' FNL & 330' FEL		8. FARM OR LEASE NAME Federal AG
14. PERMIT NO. 30-025-30326		9. WELL NO. 2
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3924' GR		10. FIELD AND POOL, OR WILDCAT Central Corbin Queen
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 8-T18S-R33E
		12. COUNTY OR PARISH Lea
		13. STATE NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input checked="" type="checkbox"/>
(Other) <input type="checkbox"/>	

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.) *

This well was plugged and abandoned in the following manner:

1. MIRU pulling unit, POOH w/tbg. & packer. RU WL & set a 5-1/2" CIBP @ 4200'. Dumped 3 sacks of cement from 4200' to 4150' on top of plug. SJS
2. RIH w/2-3/8" OE'd tbg. to 4104' and press. csg. to 1000#. Circulate the hole w/9.5 ppg. mud laden fluid. POOH w/tbg. to 3214'.
3. Spotted 15 sacks cement plug across 3214'-3114' 1/2 in and 1/2 out of 8-5/8" csg. shoe @ 3175'. POOH w/tbg.
4. Ran free point on 5-1/2" csg., found free @ 1450'. Cut csg. @ 1450' and POOH.
5. RIH w/2-3/8" OE'd tbg. and circ. 9.5 ppg. mud laden fluid. Spotted 20 sacks cmt. plug @ 1500' to 1400', 1/2 in and 1/2 out of 5-1/2" csg. @ 1450'.
6. RIH w/2-3/8" OE'd tbg. Tag plug @ 1377'. POOH to 415'. Spotted 30 sacks cmt. plug from 415' to 315'.

(Cont'd on Page 2)

18. I hereby certify that the foregoing is true and correct

SIGNED F. A. V. K. S. T. A. N. S.

TITLE Dist. Oper. Mgr. - Prod DATE 10-27-88

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE 11-8-88

*See Instructions on Reverse Side