Submit 3 Copies to Appropriate District Office	State of New Mexico Energy, Minerals and Natural Resources Department		Form C-103 Revised 1-1-89			
<u>District I</u> P.O. Box 1980, Hobbs, NM 88240		ATION DIVISION Box 2088	WELL API NO.	- 025 - 05583		
<u>District II</u> P.O.Drawer DD,Artesia, NM 88210		Mexico 87504-2088	5. Indicate Type of Lease			
District III			\$1	TATE X FEE		
1000RioBrazos Rd.Aztec,NM87410			6. State Oil & Gas Lease No B-2330			
	CES AND REPORTS C					
(DO NOT USE THIS FORM FOR PRO DIFFERENT RESER	7. Lease Name or Unit agreement Name					
1. Type of Well:	101) FOR SUCH PROPOSAL		EAST EUMONT UNI	Т		
OIL GAS WELL WELL	OTHER	INJECTION	2,101 2011 0111			
2. Name of Operator OXY USA INC			8. Well No. 28			
3. Address of Operator P.O. Box 50250 Midland, TX 79710			9. Pool name or Wildcat EUMONT YATES S	SVN RVR ON		
4. Well Location			LOW-OTT WITE C	William Gir		
Unit Letter A : 660	Feet From The NORT	H Line and 660	Feet From The	EAST Line		
Section 9	Township 19 S	Range 37 E	NMPM LEA	County		
	10. Elevation <i>(Show</i> 3,659	whether DF, RKB, RT, GR, etc.)				
11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data						
NOTICE OF INT	ENTION TO:	SUBSEC	QUENT REPOR	RT OF:		
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	X ALTERING	CASING		
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	OPNS. PLUG AND	ABANDONMENT		
PULL OR ALTER CASING		CASING TEST AND CEM	ENT JOB			
OTHER: CONVERT TO INJECTION	١	X OTHER: CONVERT TO	O INJECTION	X		
12 Describe Proposed orCompleted Operati	ons (Clearly state all pertinent	details, and give pertinent dates, nclu	oding estimated date of starti	ing any proposed		

work) SEE RULE 1103.

TD - 3975'

PBTD - 3969'

PERFS - 3868' - 3954'

MIRU PU, 10/22/93, NDWH NUBOP, RIH & TAG @ 3969'. CHC, TEST CSG TO 500#, HELD OK. PERF ADD'L INTERVAL W/ 2JSPF @ 3782-3808, 13-21, 24-49, 84-3888' TOTAL 134 HOLES. ACIDIZE W/ 5000GAL 15% NEFE HCL ACID. POOH, RIH W/ GUIB G-6 PKR & 2-3/8" TBG & SET PKR @ 3715', NDBOP, NUWH, CIRC W/ PKR FLUID, TEST CSG TO 560#, HELD OK, RDPU 10/28/93.

SHUT-IN PENDING WATER INJECTION LINE.

			R-0901
I hereby certify that the information above is true and complete to the best of my knowled SIGNATURE	dge and beli	er. REGULATORY ANALYST	DATE 11 30 93
TYPE OR PRINT NAME DAVID STEWART			TELEPHONE NO. 915 685-5717
(This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR APPROVED BY	TMLE		<u> </u>
CONDITIONS OF APPROVAL, IF ANY:	_ ·		JA Z KB