

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

WELL API NO.	30-025-04868
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	B1481

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.)	
1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	7. Lease Name or Unit Agreement Name State D
2. Name of Operator OXY USA Inc.	8. Well No. 6
3. Address of Operator P.O. Box 50250 Midland, TX. 79710	9. Pool name or Wildcat Eumont Yates 7 Rvrs Qn PG
4. Well Location Unit Letter F : 1980 Feet From The North Line and 1980 Feet From The West Line Section 32 Township 21S Range 36E NMPM Lea County	10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3611'

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐  
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER: ☐

12. 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.

TD-3871' PBTD-3745' Perfs 3299'-3693'  
MIRU PU, Kill well w/ 10#BW, NDWH, NUBOP, POOH w/ pkr & tbg. RIH w/ 5-1/2" CIBP & set @ 3765' (blanking off perfs 3785-3855'), dump 2sx cmt on top, New PBTD 3745'. RIH w/ pkr, 2-3/8" tbg & set pkr @ 3190', test tbg to 500#, held OK. Swab fluid down to SN, recd 8BW, flow well to pit for 2hrs on 1"chk w/ 25#FTP. RDPU. SITP-90# put well on line to NNG. Test well for 6 days as follows:

TIME	FTP	Choke	MCFD	Fluid
24hr	60	16/64	30	0
24hr	60	16/64	20	0
24hr	60	16/64	25	0
24hr	60	16/64	27	0
24hr	60	16/64	20	0
24hr	60	16/64	23	0

NMOCD - 24hr  
Potential Well is complete and producing

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE David Stewart TITLE Production Accountant DATE 3/15/91  
TYPE OR PRINT NAME David Stewart TELEPHONE NO. 9156855717

(This space for State Use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY: