Submit 3 Copies to Appropriate District Office

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

State of New Mexico Energy, Minerals and Natural Resources Department Form C-103

District I

P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION

I OI III O	
Revised	1-1-89

_ DATE _

WELL API NO.

District II	P.O. Box 208	8	30 - 025 - 10634
P.O.Drawer DD,Artesia, NM 88210	Santa Fe, New Mexico	87504-2088 5. Ind	licate Type of Lease
District III			STATE FEE X
1000RioBrazos Rd.Aztec,NM87410		6. Sta	te Oil & Gas Lease No.
SUNDRY NOTICE	ES AND REPORTS ON WEL	IS	
(DO NOT USE THIS FORM FOR PROPO	SALS TO DRILL OR TO DEEPEN	OR PLUG BACK TO A	ase Name or Unit agreement Name
	DIR. USE "APPLICATION FOR PERI 1) FOR SUCH PROPOSALS.)	MIT*	
1. Type of Well:	·,·····,	SKE	ELLY PENROSE B UNIT
OIL X GAS WELL	OTHER		
2. Name of Operator OXY USA INC.		8. Wel	II No. 26
3. Address of Operator		9. Poo	ol name or Wildcat
P.O. Box 50250	Midland, TX 79710	LA	ANGLIE MATTIX 7 RVR Q-GB
4. Well Location	NODTL	•••	MICT
Unit Letter E : 1,980	Feet From The NORTH	Line and990	Feet From The WEST Line
Section 5	Township 23 S Ran	ge 37 E NMPM	LEA County
	10. Elevation <i>(Show whether I</i> 3,367	DF, RKB, RT, GR, etc.)	
11. Check Appro	opriate Box to Indicate Natu	ure of Notice, Report, or	Other Data
NOTICE OF INTE	NTION TO:	SUBSEQUE	ENT REPORT OF:
TV I		REMEDIAL WORK	X ALTERING CASING
	二		
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	c	CASING TEST AND CEMENT J	ов
		TUED.	
OTHER:		OTHER:	
12.Describe Proposed orCompleted Operations	s (Clearly state all pertinent details, an	nd give pertinent dates, ncluding e	estimated date of starting any proposed
work) SEE RULE 1103.			
	TD - 3780' PBTD - 3774'	PERFS - 3659' - 3768	3'
		*	
MIRU PU 4/12/93, NDWH, NUBOP			
TEST CSG TO 500#, HELD OK, PC		_	
PUMP ON 76-RD STR, RDPU 4/17/	93, START WELL PUMPING	TO BATTERY @ 35"STR)	(13.5 SPM.
NMOCD POTEN	TIAL TEST 4/28/93 - 24HR	2-BO 102-BW GAS-TSTI	М
			•
I hereby certify that the information above is true and	complete to the best of my knowledge and b	elief.	
SIGNATURE VIALUM	TITLE	Production Accountant	DATE 05 14 93
TYPE OR PERNT NAME David Stewart			THE CONTRACT OF THE CONTRACT O
TYPE OR PENT NAME David Stewart			TELEPHONE NO. 915 685-5717
(This space for State Hept INAL SERNING BY J	SERY SEXTON		
BISTIMOT I SUPE	RVISOR		MAY 2 0 199
ADDROVEDBY	тпь		DATE