

Submit 3 Copies
to Appropriate
District Office

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

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

Form C-103
Revised 1-1-89

WELL API NO. 30 - 025 - 10648

5. Indicate Type of Lease
STATE ☐ FEE ☒

6. State Oil & Gas Lease 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.)

1. Type of Well:
OIL WELL ☒ GAS WELL ☐ OTHER

2. Name of Operator
OXY USA INC.

3. Address of Operator
P.O. Box 50250 Midland, TX 79710

4. Well Location
Unit Letter A : 330 Feet From The NORTH Line and 330 Feet From The EAST Line
Section 6 Township 23 S Range 37 E NMPM LEA County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3,383

7. Lease Name or Unit agreement Name

SKELLY PENROSE B UNIT

8. Well No.
22

9. Pool name or Wildcat
LANGLIE MATTIX 7 RVR Q-GB

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: TEMPORARILY ABANDONED ☒

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 - 3795' PERFS - 3670' - 3786'

MIRU PU 7/23/93, NDWH, NUBOP, RIH & TAG @ 3773', CO TO 3795'. RIH W/ PKR & TBG & SET @ 3601', SWAB TEST WELL, POOH. RIH W/ CIBP & SET @ 3601', CIRC HOLE W/ CORR INH, TEST CSG TO 500#, HELD OK NDBOP, NUWH, RDPU 7/7/93.

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

SIGNATURE David Stewart TITLE REGULATORY ANALYST DATE 09 07 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 _____

TITLE _____ DATE SEP 09 1993

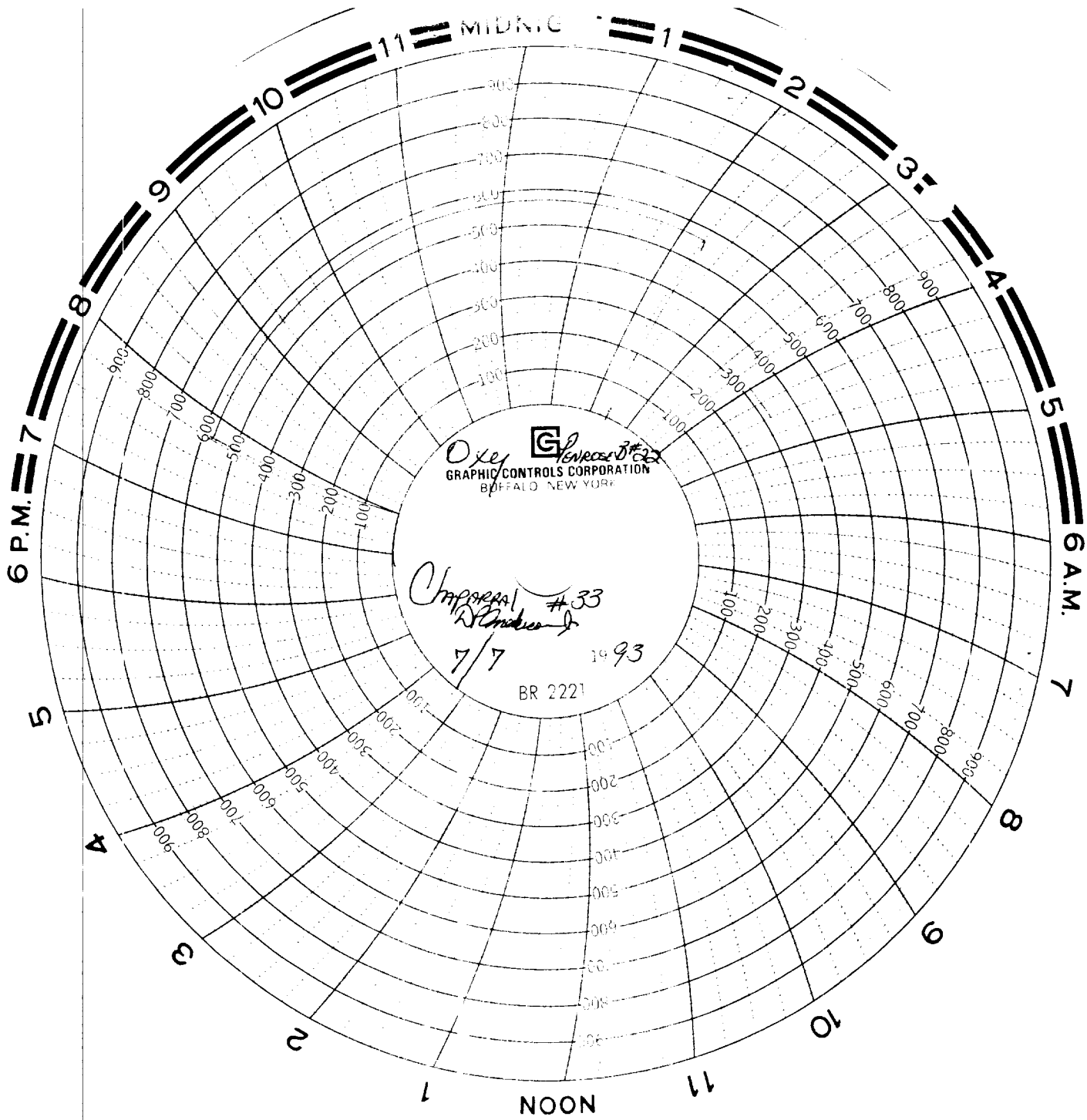
CONDITIONS OF APPROVAL, IF ANY:

This Approval of Temporary
Abandonment Expires 9-1-98

RECEIVED

SEP 08 1993

OFFICE



Oxy  GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK

Chaparral #33
7/7 1993
BR 2221