Submit 3 Copies to Appropriate
District Office

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103

District I

OIL CONCEDVATION DIVISION

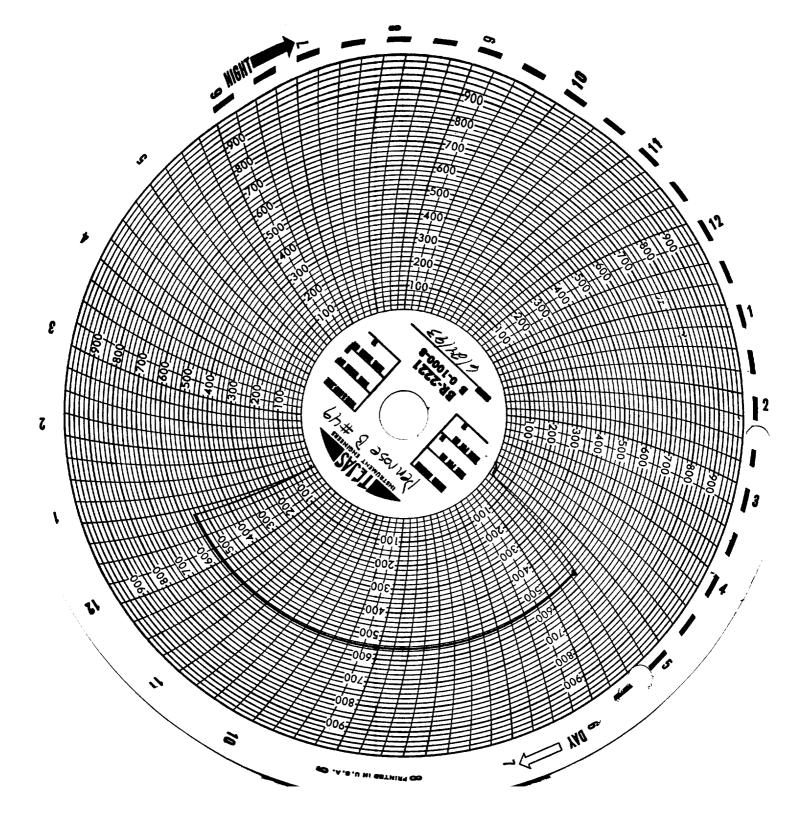
Revised 1-1-89

P.O. Box 1980, Hobbs, NM 88240 P.O. Box		WELL API NO	30 - 025 - 10671
District II P.O.Drawer DD, Artesia, NM 88210 Santa Fe, New Mex		5. Indicate Type	
District III			STATE FEE X
1000RioBrazos Rd.Aztec,NM87410		6. State Oil & Ga	as Lease No.
SUNDRY NOTICES AND REPORTS ON			
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEE DIFFERENT RESERVOIR. USE *APPLICATION FOR		7. Lease Name o	or Unit agreement Name
(FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well:		OKELI V DE	NROSE B UNIT
OHER		SKELLTIE	INITOOL D OINT
2. Name of Operator OXY USA INC.		8, Well No.	40
3. Address of Operator		9. Pool name or	49 Wildcat
P.O. Box 50250 Midland, TX 79710		LANGLIE	MATTIX 7 RVR Q-GB
4. Well Location G 1 980 F-AS T- NORTH		4.000	- The EAST Line
Unit Letter : reet from the	Line and _	1,980 Feet Fro	om thethe
Section 8 Township 23 S	Range 37 E	нмрм	LEA County
10. Elevation <i>(Show wh</i> 3,310	ether DF, RKB, RT, GR,	etc.)	
11. Check Appropriate Box to Indicate	Nature of Notice	, Report, or Other I	Data
NOTICE OF INTENTION TO:		JBSEQUENT F	
PERFORM REMEDIAL WORK PLUG AND ABANDON	REMEDIAL WO	RK	ALTERING CASING
TEMPORARILY ABANDON X CHANGE PLANS	COMMENCE D	RILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CASING TEST A	AND CEMENT JOB	
	_,	<u></u>	NED V
OTHER:		PORARILY ABANDO	
12.Describe Proposed orCompleted Operations (Clearly state all pertinent details	ails, and give pertinent	dates, ncluding estimated o	late of starting any proposed
work) SEE RULE 1103.			
TD - 3700' PBTD - 36	90' PERFS	- 3456' - 3661'	
MIRU PU 6/15/93, NDWH, NUBOP, RIH & TAG @ 3618', Co	O TO 3681' RIH	W/ PKR & TRG & SE	T @ 3448' TEST CSG TO
500#, HELD OK. PERF ADD'L QUEEN @ 3456-64, 3494-3			
3657-3661', TOTAL 162 HOLES. ACIDIZE W/ 6000 GAL 15	% NEFE HCL AC	ID. SWAB TEST WE	LL, POOH. ISOLATE CSG
LEAK FROM 3378'-3408'. RIH W/ CIBP & SET @ 3510', RICMT W/ 2% CACL2, SQUEEZE TO 1000#, POOH, WOC.	H & SET CR @ 3: CIRC HOLE W/ CI	325', EIR @ 2BPM @ OBB INH TEST CSC	700#, M&P 100SX CL C STO 500# HFLD OK
NDBOP, NUWH, RDPU 6/24/93.		O(11 11 11 11 1 1 1 1 1 1 1 1 1 1 1 1 1	110 000, 11220 010
Thereby certify that the information above is true and complete to the best of my knowledge	e and beliet.		20.07.00
SIGNATURE GINTS SELF	TITLE REGULA	ATORY ANALYST	DATE
TYPE OR PRINT NAME DAVID STEWART		-	915 685-5717
(This space for State Use)			
ORIGINAL SIGNED BY JERRY SEXTON			SEP 0 9 1993
APPROVED BY DISTRICT I SUPERVISOR	TITLE		
CONDITIONS OF APPROVAL, IF ANY:	This Approv	val of Temporary t Expires	9-1-98

RECEIVED

SEP 0 8 1993

OFFICE



Genrose & M