

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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

WELL API NO.	30 - 025 - 10690
5. Indicate Type of Lease	STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
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 <input checked="" type="checkbox"/>	GAS WELL <input type="checkbox"/>	OTHER <input type="checkbox"/>
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2. Name of Operator	OXY USA INC.
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3. Address of Operator	P.O. Box 50250 Midland, TX 79710
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4. Well Location	Unit Letter <u>M</u> : <u>660</u> Feet From The <u>SOUTH</u> Line and <u>660</u> Feet From The <u>WEST</u> Line
	Section <u>9</u> Township <u>23 S</u> Range <u>37 E</u> NMPM <u>LEA</u> County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)	3,322
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11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK	<input checked="" type="checkbox"/>	PLUG AND ABANDON	<input type="checkbox"/>
TEMPORARILY ABANDON	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>		
OTHER:	<input type="checkbox"/>		

SUBSEQUENT REPORT OF:

REMEDIAL WORK	<input checked="" type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
COMMENCE DRILLING OPNS.	<input type="checkbox"/>	PLUG AND ABANDONMENT	<input type="checkbox"/>
CASING TEST AND CEMENT JOB	<input type="checkbox"/>		
OTHER:	<input type="checkbox"/>		


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 - 3670' PERFS - 3526' - 3636'

MIRU PU 10/1/93, NDWH NUBOP, POOH W/ TBG & RBP. RIH W/ 2-3/8" TBG & SET @ 3659', RIH W/ 2" X 1-1/2" X 16' BHD PUMP ON 77-RD STR, RDPU 10/1/93, START WELL PUMPING TO BATTERY 10/7/93.

NMOCD POTENTIAL TEST 10/14/93 - 24HR 3-BO 113-BW GAS-TSTM

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

SIGNATURE		TITLE	REGULATORY ANALYST	DATE	11 16 93
TYPE OR PRINT NAME	DAVID STEWART	TELEPHONE NO.	915 685-5717		

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON

APPROVED BY _____ DISTRICT I SUPERVISOR TITLE _____ DATE 11 19 1993

CONDITIONS OF APPROVAL, IF ANY: