

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

N.M. OIL CONS. COMMISSION  
PO BOX 1980  
HOBBS, NEW MEXICO 88240

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

**SUNDRY NOTICES AND REPORTS ON WELLS**

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals

**SUBMIT IN TRIPLICATE**

1. Type of Well  
☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator  
OXY USA Inc.

3. Address and Telephone No.  
P.O. Box 50250 Midland, TX 79710 915-685-5717

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
2323 FSL 990 FEL NESE Sec 5 T25S R38E

5. Lease Designation and Serial No.  
8910084910 -NMLC062368

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation  
W. Dollarhide Qn Sd Unit

8. Well Name and No.

64

9. API Well No.  
30-025-12392

10. Field and Pool, or Exploratory Area  
Dollarhide Queen

11. County or Parish, State  
Lea NM

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent  
☐ Subsequent Report  
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment  
☐ Recompletion  
☐ Plugging Back  
☐ Casing Repair  
☐ Altering Casing  
☒ Other Correct well type  
☐ Change of Plans  
☐ New Construction  
☐ Non-Routine Fracturing  
☐ Water Shut-Off  
☐ Conversion to Injection  
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

This is being filed to clarify the status of this well, it is a TA'd Oil Well.

ACCEPTED FOR RECORD

*J. Lara*  
28 1995

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MAY 17 10 57 AM '95

14. I hereby certify that the foregoing is true and correct

Signed David Stewart Title Regulatory Analyst

Date 5/16/95

(This space for Federal or State office use)

Approved by \_\_\_\_\_  
Conditions of approval, if any:

Title \_\_\_\_\_

Date \_\_\_\_\_

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