Submit 3 Copies to Appropriate District Office District I P.O. Box 1980 Hobbs, NM 88240

world SEE RULE 1103.

CONDITIONS OF APPROVAL, IF ANY:

State of New Mexico , Minerals and Natural Resources Department

Form C-103 **Revised 1-1-89**

OIL CONSERVATION DIVISION

WELL API NO.

District II	P.O. Box 20	088	1	30 -	025 - 32112	
P.O.Drawer DD,Artesia, NM 88210	Santa Fe, New Mexico 87504-2088		5. Indicate	ype of Lease		
District ill				STA	TE FEE X	
1000RioBrazos Rd.Aztec,NM87410			6. State Oil	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 RESERVO	7. Lease Na	7. Lease Name or Unit agreement Name				
(FORM C-10	I) FOR SUCH PROPOSALS.)					
1. Type of Well: OIL GAS WELL WELL	OTHER		SKELLY	PENROSE B	UNIT	
2. Name of Operator OXY USA INC.			8. Well No.	8. Well No. 71		
3. Address of Operator P.O. Box 50250 Midland, TX 79710				9. Pool name or Wildcat LANGLIE MATTIX 7 RVR QN-GB		
4. Well Location						
Unit Letter K : 1,420	Feet From The SOUTH	Line and2,6	14 Fee	t From TheV	/ESTLine	
Section 5	Township 23 S p	tange 37 E	NMPM	LEA	County	
	10. ⊟evation <i>(Show whethe</i> 3,334	er DF, RKB, RT, GR, etc.)				
11. Check Appro	opriate Box to Indicate Na	ture of Notice, Re	port, or Othe	er Data		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:						
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK		ALTERING C	ASING	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLII	NG OPNS.	PLUG AND A	BANDONMENT	
PULL OR ALTER CASING		CASING TEST AND C	EMENT JOB			
OTHER:		OTHER:				
	(Clearly state all pertinent details,	OTHER:				

DRILL 7-7/8" HOLE TO TD OF 3850' @ 2215MDT 9/30/93. CIRC & COND HOLE. RUN LOGS DLL-MSFL-GR-CAL & LDT-CNL-GR-CAL. RIH W/ 5-1/2" 15.5# K-55 CASING & SET @ 3850'. CEMENT W/ 600SX PREM PLUS W/ 15# SALT + 1/4# FLOCELE FOLLOWED BY 150SX CL C 50/50 POZ. W/ 2% GEL + 3# KCL + 3/10% HALAD-9, PLUG DOWN @ 10/1/93, DID NOT CIRC CMT, NMOCD WAS NOTIFIED BUT DID NOT WITNESS. ND BOP, SET SLIPS & CUT OFF CSG. REL RIG @ 1900MDT 10/1/93. WOC 8HRS, RIH W/ TEMP SVY, TOC @ 600'. INSTALL WH, SI WO COMPLETION UNIT.

I hereby certify that the	information above is true and complete to the best of my know	edge and bei	ief.	
SIGNATURE	WAST		REGULATORY ANALYST	DATE 10 14 93
TYPE OR PRINT NAME	DAVID STEWART			TELEPHONE NO. 915 685-5717
(This space for State Us				
APPROVED BY	ORIGINAL SIGNED BY JERRY SEXTON DISTRICT SUPERVISOR	TILE .		pull CT 1 8 1993