

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Div. FORM APPROVED  
Budget Bureau No. 1004-0135  
P.O. Box 1981  
Hobbs, NM 88401  
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<br><input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <i>Water Injection</i> | 7. If Unit or CA, Agreement Designation<br>W. Dollarhide Qn Sd Unit<br>008596 |
| 2. Name of Operator<br>OXY USA Inc. 16696                                                                                                               | 8. Well Name and No.<br><i>24</i>                                             |
| 3. Address and Telephone No.<br>P.O. Box 50250 Midland, TX 79710-0250 915-685-5717                                                                      | 9. API Well No.<br>30-025-12276                                               |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)<br><i>330 FNL 1650 FEL NWNE(B) Sec 31 T24S R38E</i>                              | 10. Field and Pool, or Exploratory Area<br>Dollarhide Queen                   |
|                                                                                                                                                         | 11. County or Parish, State<br>Lea NM                                         |

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

| TYPE OF SUBMISSION                                   | TYPE OF ACTION                                                       |
|------------------------------------------------------|----------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Notice of Intent | <input type="checkbox"/> Abandonment                                 |
| <input type="checkbox"/> Subsequent Report           | <input type="checkbox"/> Recompletion                                |
| <input type="checkbox"/> Final Abandonment Notice    | <input type="checkbox"/> Plugging Back                               |
|                                                      | <input type="checkbox"/> Casing Repair                               |
|                                                      | <input type="checkbox"/> Altering Casing                             |
|                                                      | <input checked="" type="checkbox"/> Other <i>Temporarily Abandon</i> |
|                                                      | <input type="checkbox"/> Change of Plans                             |
|                                                      | <input type="checkbox"/> New Construction                            |
|                                                      | <input type="checkbox"/> Non-Routine Fracturing                      |
|                                                      | <input type="checkbox"/> Water Shut-Off                              |
|                                                      | <input type="checkbox"/> Conversion to Injection                     |
|                                                      | <input type="checkbox"/> Dispose Water                               |

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.)\*

TD - 3890' PBTD - 3836' PERFS - 3571-3742' PKR/CIBP - 3481'

OXY USA INC. REQUESTS TO TEMPORARILY ABANDON THIS WELL FOR FUTURE EXPANSION OF THE WATERFLOOD UNIT.

- 1) NOTIFY BLM/NMOC D OF CASING INTEGRITY TEST 24 HRS IN ADVANCE.
- 2) RU PUMP TRUCK, CIRCULATE WELL WITH TREATED WATER, PRESSURE TEST CASING TO 500# FOR 30 MIN.

RECEIVED

JUN 23 97

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

Signed

*David Stewart*

Title

David Stewart  
Regulatory Analyst

Date

BLM  
ROSWELL, NM  
6/20/97

(This space for Federal or State office use)

(ORIG. SGD.) DAVID R. GLASS

Approved by

Conditions of approval, if any:

Title

PETROLEUM ENGINEER

Date

JUN 23 1997