Submit 3 Copies to Appropriate District Office

District I
P.O. Box 1980, Hobbs, NM 88240

District II
P.O. Box 1980, Hobbs, NM 88240

District III
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONVERSATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-103
Revised 1-1-89

WELL API NO. 30 - 025 - 30295 ✓

5. Indicate Type of Lease STATE [X] FEE [ ]

6. State Oil & Gas Lease No. B9613

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.)

7. Lease Name or Unit agreement Name: WEST DOLLARHIDE QN SD UT

1. Type of Well: OIL WELL [ ] GAS WELL [ ] OTHER INJECTION

2. Name of Operator: OXY USA INC.

8. Well No. 135

3. Address of Operator: P.O. Box 50250 Midland, TX 79710

9. Pool name or Wildcat: DOLLARHIDE QUEEN

4. Well Location
Unit Letter F : 2,100 Feet From The NORTH Line and 1,630 Feet From The WEST Line
Section 32 Township 24 S Range 38 E NMPM LEA County

10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3,167

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK	X	PLUG AND ABANDON		REMEDIAL WORK	X	ALTERING CASING	
TEMPORARILY ABANDON		CHANGE PLANS		COMMENCE DRILLING OPNS.		PLUG AND ABANDONMENT	
PULL OR ALTER CASING				CASING TEST AND CEMENT JOB			
OTHER:				OTHER:			

12. Describe Proposed or Complete Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any work) SEE RULE 1103.

TD - 3950' PBTD - 3894' PERFS - 3633' - 3800'

MIRU PU, NDWH, NUBOP, POOH W/ PKR & 2-3/8" TBG. RIH & TAG @ 3796', CLEAN OUT TO 3894'. PERFORATE ADD'L INTERVAL 3633-3636, 3711-3712, 3758-3766', TOTAL 30 HOLES. ACIDIZED PERFS W/ 1800 GAL MODIFIED SWIC ACID. RIH W/ BAKER AD-1 & 2-3/8" TBG, SET PKR @ 3519', NDBOP, NUWH. PRESS CSG TO 300#, HELD OK, RDPU. START INJECTING 120 BWPD @ 1110#.

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

SIGNATURE _____ TITLE Production Accountant DATE 04 13 93

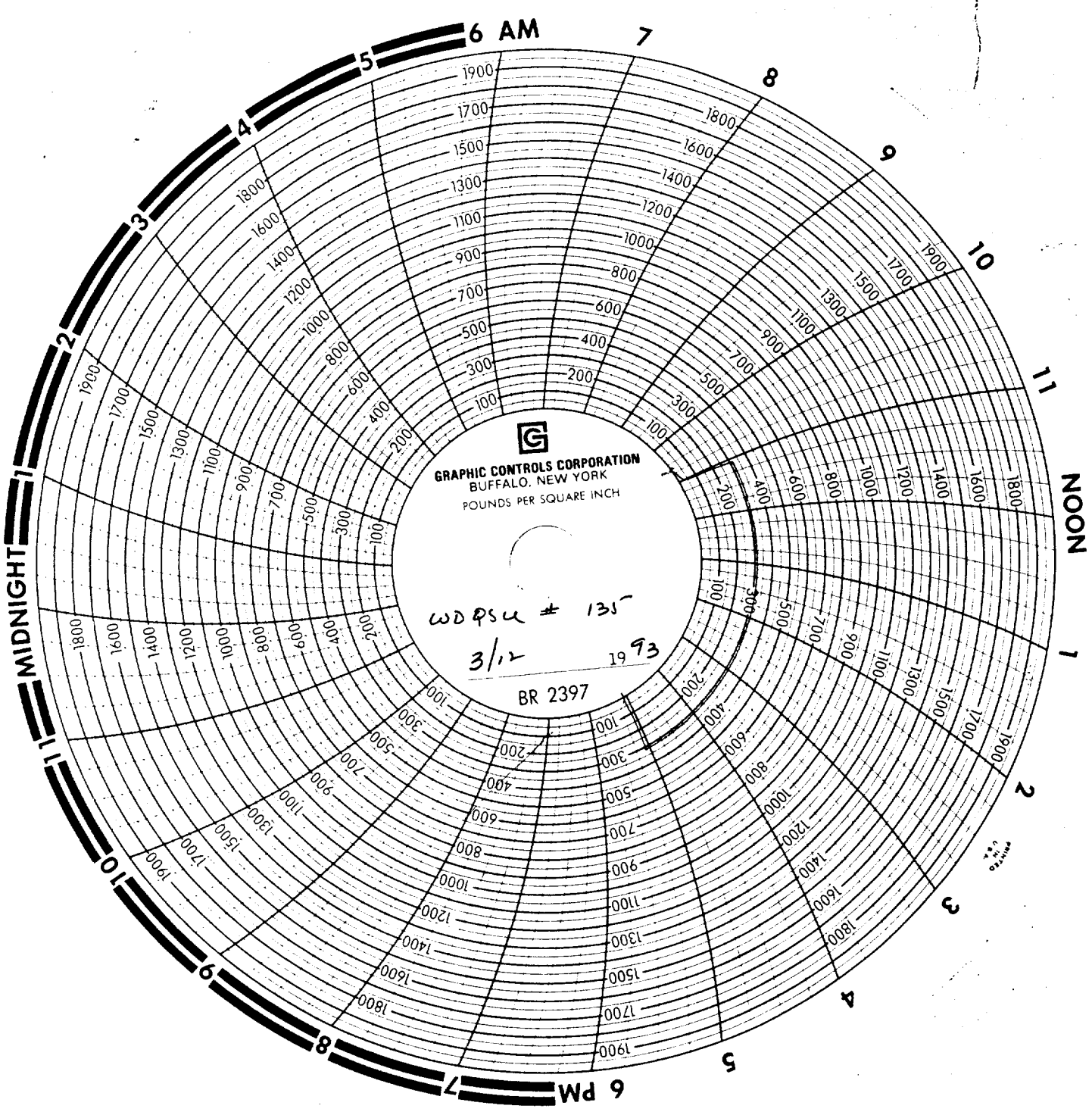
TYPE OR PRINT NAME David Stewart TELEPHONE NO. 915 685-5717

(This space for State Use)

APPROVED BY ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR TITLE _____ DATE APR 15 1993

CONDITIONS OF APPROVAL, IF ANY:

C Sw 5


6 AM
NOON
MIDNIGHT
6 PM
GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK
POUNDS PER SQUARE INCH
WORSH # 131
3/12
19 93
BR 2397

WDQSU ± 135

H-5 mech. integ. test

tbg press - ~~3000~~ 0*

csg press - 300 ±

John M. Stinson Eng. Tech.

3/12/93