

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.
30-025-10980

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
89974

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 ☐ GAS WELL ☐ OTHER Water Injection

2. Name of Operator
OXY USA Inc. 16696

7. Lease Name or Unit Agreement Name
Myers Langlie Mattix Unit
011007

3. Address of Operator
P.O. Box 50250 Midland, TX 79710-0250

8. Well No.
154

4. Well Location
Unit Letter E : 1966 Feet From The North Line and 662 Feet From The West Line

Section 2 Township 24S Range 37E NMPM Lea County

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

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☒
PULL OR ALTER CASING ☐
OTHER: ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☐
OTHER: ☐

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

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- 3640 ' PBTD- — ' PERFS- 3399-3640 ' PKR- 3353 '

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

1) MIRU PU, TIH W/ CIBP & SET @ APPROXIMATELY 3349 ' .

2) NOTIFY NMOCD/BLM OF CASING INTEGRITY TEST 24 HRS IN ADVANCE.

3) RU PUMP TRUCK, CIRCULATE WELL WITH TREATED WATER, PESSURE TEST CASING TO 500# FOR 30 MIN.

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

SIGNATURE David Stewart TITLE Regulatory Analyst DATE 1/25/99

TYPE OR PRINT NAME David Stewart

TELEPHONE NO. 9156855717

(This space for State Use)

ORIGINAL SIGNED BY

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

89974

7. Lease Name or Unit Agreement Name

Myers Langlie Mattix Unit

011007

8. Well No.

154

9. Pool name or Wildcat

037240

Langlie Mattix 7 Rvr 0-G

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WELL ☐

GAS
WELL ☐

OTHER Water Injection

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16696

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P.O. Box 50250 Midland, TX 79710-0250

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Section 2

Township 24S

Range 37E

NMPM

Lea

County

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

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: MIT - TA STATUS ☒

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed

MYERS LANGLIE MATTIX UNIT #154

TD-3640'

PERFS-3399-3640'

This Approval of Temporary
Abandonment Expires 11-14-98

Reluct 1 year from now
11-14-97

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

MIRU PU 7/14/97, NDWH, NUBOP. REL PKR & POOH. RIH BAKER AD-1
PKR & 2-3/8" TBG W/ BULL PLUG (TESTER UNABLE TO TEST TBG DUE TO
PC), RIH & TEST TO 500# FOR 15min, OK. POOH, REMOVE BP & RIH W/
PKR & TBG. NDBOP, NUWH, CIRC W/ PKR FLUID, SET PKR @ 3353'.
TEST CSG TO 560# FOR 15 MIN, BLED DOWN 40#. SET PKR @ 3321'.
TEST CSG TO 520# FOR 30 MIN, BLED DOWN TO 440#. RDPU 7/18/97,
PRES CSG TO 360# FOR 15min, OK. WELL SI, NMOCN NOTIFIED BUT DID
NOT WITNESS TEST.

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

SIGNATURE

David Stewart

TITLE

Regulatory Analyst

DATE

10/6/97

TYPE OR PRINT NAME

David Stewart

TELEPHONE NO. 9156855717

(This space for State Use) ORIGINAL SIGNATURE OF DISTRICT I SUPERVISOR

NOV 14 1997

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

ICISGB

CP

