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State of New Mexico

Form C-103

nerals and Natural Resources Department Energy, Revised 1-1-89 District Office OIL CONSERVATION DIVISION DISTRICT I WELL API NO. P.O. Box 1980, Hobbs, NM 88240 P.O. Box 2088 300Z511059 Santa Fe, New Mexico 87504-2088 5. Indicate Type of Lease P.O. Drawer DD, Artesia, NM 88210 FEE X 6. State Oil & Gas Lease No. 1000 Rio Brazos Rd., Aztec, NM 87410 SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name
Myers Langlie Mattix Unit DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well: METT X WELL. 2. Name of Operator lexaco Hoducina 9. Pool name or Wildcat New Mexico 88240 Langlie Mattix SR-Q-GB Line and 1980 Feet From The Eas 660 Feet From The North Unit Letter ship Z + S Range 37 E 10. Elevation (Show whether DF, RKB, RT, GR, etc., Z4 S County Section 3297 DECheck Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. SUBSEQUENT REPORT OF: NOTICE OF INTENTION TO: PLUG AND ABANDON REMEDIAL WORK ALTERING CASING PERFORM REMEDIAL WORK PLUG AND ABANDONMENT **TEMPORARILY ABANDON CHANGE PLANS** COMMENCE DRILLING OPNS. CASING TEST AND CEMENT JOB **PULL OR ALTER CASING** OTHER: lemporarily Abandon OTHER: 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. Kig up pulling unit and TOH with rods and pump. Installed BOP and TOH with tubing. May 17, 1986. Z. TIH with workstring, casing scraper and bit to 3360. TOH with workstring and tools. 3. Ran 51/2" CIBP on wireline to 3355 and set CIBP. Dumped 36 of cement on CIBP with a dump bailer. 4. TIH with workstring and packer and tested CIBP plug at 3355' to 500 psi Held ok. Casing tested bad 3062-619: Circulated pocker I'luid. TOH with workstring. Temporarily Abandoned May 21, 1986. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

TELEPHONE NO. 505-394-2585 ohnson TYPE OR PRINT NAME Orig. Signed by (This space for State Use) Paul Kautz Geologist

AREA SUPERINTENDENT

CONDITIONS OF APPROVAL, IF ANY:

APPROVED BY

ZA Lanalie Matter SR-DY

DATE

JAN 3 1 1989

RECEIVED

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