

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.

30-025-27385

5. Indicate Type of Lease

STATE ☐

FEE ☒

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 RESERVOIR. USE 'APPLICATION FOR PERMIT'
(FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:

OIL
WELL ☒

GAS
WELL ☐

OTHER

2. Name of Operator

OXY USA Inc.

16696

3. Address of Operator

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

4. Well Location

Unit Letter D : 660 Feet From The North Line and 660 Feet From The West Line

Section

10

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 work) SEE RULE 1103.

This Approval of Temporary
Abandonment Expires

MYERS LANGLIE MATTIX UNIT #193

TD-3700' PBTD-3351' PERFS-3467-3624' CIBP-3392'

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

MIRU PU 6/22/98, NDWH, NUBOP. POOH W/ RODS, PUMP & TBG. RIH W/ CIBP & SET @
3392', DUMP 35' CMT ON TOP, SION. RIH & TAG CMT @ @ 3351', CIRC W/ PKR FLUID,
TEST CSG TO 540# FOR 30min, OK. NDBOP, NUWH, RDPU 6/23/98. NMOCD NOTIFIED BUT
DID NOT WITNESS TEST, BLM- PAT HUTCHINGS WITNESSED 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 7/6/98

TYPE OR PRINT NAME David Stewart

TELEPHONE NO. 9156855717

(This space for State Use)

CHAIRMAN, STATE OF NEW MEXICO
DISTRICT SUPERVISOR

APPROVED BY _____ TITLE _____ DATE AUG 24 1998

CONDITIONS OF APPROVAL, IF ANY:

SC 6 NS

glo