

Submit 3 Copies To Appropriate District Office

District I

1625 N. French Dr., Hobbs, NM 88240

District II

811 South First, Artesia, NM 88210

District III

1000 Rio Brazos Rd., Aztec, NM 87410

District IV

2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION

2040 South Pacheco

Santa Fe, NM 87505

Form C-103

Revised March 25, 1999

WELL API NO.

30-025- 29589

5. Indicate Type of Lease

STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name:

MYERS LANGLIE MATTIX UNIT

8. Well No.

256

9. Pool name or Wildcat

LANGLIE MATTIX 7RVR-QN-GB

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 WTP Limited Partnership

192463

3. Address of Operator

P.O. BOX 50250 MIDLAND, TX 79710-0250

4. Well Location

Unit Letter D : 105 feet from the North line and 1310 feet from the West line

Section 6 Township 24S Range 37E NMPM County LEA

10. Elevation (Show whether DR, 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 ☐ MULTIPLE COMPLETION ☐

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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

OXY USA INC. REQUESTS TO TEMPORARILY ABANDON THIS WELL FOR POSSIBLE FUTURE USE.

TD-3760 PBDT-3402 PERFS-3452-3743 PKR/CIBP-3402
RH & set CIBP @ 3402', no cement.

1) NOTIFY BLM/NMOC of CASING INTEGRITY TEST 24 HRS IN ADVANCE.

2) RU PUMP TRUCK 3/4/01, CIRCULATE WELL WITH TREATED WATER, PRESSURE TEST CASING TO 530 # FOR 30 MIN.

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

SIGNATURE _____ TITLE REGULATORY ANALYST DATE _____

Type or print name DAVID STEWART

(This space for State use)

Telephone No. 915-685-5717

APPROVED BY _____ TITLE _____ DATE _____

Conditions of approval, if any:

The Approval of Temporary Abandonment Expires 4/23/01

JENG

