

Submit 3 Copies
to Appropriate
District Office

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

State of New Mexico
Energy, Minerals and Natural Resources Department

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

Form C-103
Revised 1-1-89

WELL API NO.	30 - 025 - 32537
5. Indicate Type of Lease	STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	7. Lease Name or Unit agreement Name MYERS LANGLEIE MATTIX UNIT
2. Name of Operator OXY USA INC.	8. Well No. 266
3. Address of Operator P.O. Box 50250 Midland, TX 79710	9. Pool name or Wildcat LANGLIE MATTIX 7RVR Q-G
4. Well Location Unit Letter C : 100 Feet From The NORTH Line and 2,556 Feet From The WEST Line Section 6 Township 24 S Range 37 E NMPM LEA County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3,322	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>
	OTHER: SPUD, SET SURFACE CASING & CEMENT <input checked="" type="checkbox"/>

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.

MIRU EXETER #70, SPUDDED 12-1/4" HOLE @ 1245HRS MDT 6/12/94, DRILL TO TD @ 404', CHC. RIH W/ 8-5/8" 24# CASING & SET @ 402', M&P 260sx CL C W/ 2% CACL2 + 1/4# /sx CELLO-FLAKE, DISPLACE W/ FW, PLUG DOWN @ 0945HRS MDT 6/12/94, CIRC 100sx CMT TO PIT, NMOCD NOTIFIED DID NOT WITNESS, WOC-8HRS. NU BOP & TEST, DRILL OUT & TEST, DRILL AHEAD.

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 07 07 94
TYPE OR PRINT NAME DAVID STEWART TELEPHONE NO. 915 685-5717

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

JUL 11 1994

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: