

Submit 1 Copy To Appropriate District Office
District I - (575) 393-6161
1625 N. French Dr., Hobbs, NM 88240
District II - (575) 748-1283
811 S. First St., Artesia, NM 88210
District III - (505) 334-6178
1000 Rio Brazos Rd., Aztec, NM 87410
District IV - (505) 476-3460
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised July 18, 2013

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-015-44590
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Corral Fly 02-01 State
8. Well Number 36H
9. OGRID Number 16696
10. Pool name or Wildcat Purple Sage; Wolfcamp (Gas)

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN A WELL IN A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR PROPOSALS.)	
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <input type="checkbox"/>	OCT 04 2018 RECEIVED
2. Name of Operator OXY USA INC.	
3. Address of Operator P.O. BOX 50250 MIDLAND, TX 79710	
4. Well Location Unit Letter <u>M</u> : <u>1205</u> feet from the <u>SOUTH</u> line and <u>240</u> feet from the <u>WEST</u> line Section <u>2</u> Township <u>25S</u> Range <u>29E</u> NMPM County <u>EDDY</u>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3034' GR	

12. 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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input checked="" type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

7/16/18 RU BOP, test @ 250# low 5500# high, test 10-3/4" casing to 1500# for 30 min, good test. RIH & drill new formation to 424', perform FIT test to EMW=22.5ppg, 305psi, good test. 7/18/18 drill 9-7/8" hole to 9745', 7/24/18. RIH & set 7-5/8" 26.4# L-80 csg @ 9733', DVT @ 3323', ACP @ 3337' pump 80bbl mud push spacer then cmt w/ 641sx (295bbl) PPC w/ additives 10.2ppg 2.58 yield followed by 175sx (50bbl) PPC w/ additives 13.2ppg 1.6 yield, full returns throughout job, inflate ACP to 2650#, open DVT, circ thru DVT, circ 130sx (60bbl) cmt to surf. Pump 2nd stage w/ 50bbl brine water w/ surfactant then cmt w/ 1168sx (350bbl) PPC w/ additives 13.6ppg 1.69 yield, full returns, drop cancellation plug, pressure up & close DVT, circ 695sx (210bbl) cmt to surface, WOC. Install pack-off, test lower seals to 5000#, good test. 7/25/18 ND BOP, install wellhead cap and prepare rig for skid.

8/31/18 Skid rig from Corral Fly 02-01 State 35H to Corral Fly 02-01 State 36H. RU BOP, test @ 250# low 5500# high. RIH & drill out DVT, test 7-5/8" csg to 3200# for 30min, good test. Drill new formation to 9755', perform FIT test to EMW=13ppg, 1355psi, good test. 9/1/18 Drill 6-3/4" hole to 20300'M 10388'V 9/8/18. RIH & set 5-1/2" 20# P110 csg @ 20287'. Pump 135bbl mud push spacer w/ surfactant then cmt w/ 816sx (202bbl) PPC w/ additives @ 13.2ppg 1.39 yield, full returns throughout job, est. TOC @ 6880', WOC. 9/10/18 RUWL RIH & set RBP @ 2990', test RBP to 1000# for 30 min, good test. ND BOP, Install wellhead cap, RD Rel Rig 9/10/18.

Spud Date:

7/3/18

Rig Release Date:

9/10/18

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

SIGNATURE [Signature] TITLE Regulatory Specialist DATE 10/1/18

Type or print name Jana Mendiola E-mail address: janalyn_mendiola@oxy.com PHONE: 432-685-5936

For State Use Only

APPROVED BY: [Signature] TITLE Business Spec A DATE 10-4-2018

Conditions of Approval (if any):

ENTERED
[Stamp]