| Form | n (| C-103 | |
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| August | 1. | 2011 | |

DATE 7/11/2013 10:52:13 AM

| State of New Mexico | | | | Form C-1 August 1, 20 Permit 1698 | | | |
|--|---|---|-------------------------------------|--|-----------------------------|--|--|
| District II 811 S. First St., Artesia, NM 88210 | | ources | | WELL API NUI | | | |
| Phone: (575) 748-1283 Fax: (575) 748-9720 District III | Phone:(575) 748-1283 Fax:(575) 748-9720 | | | 30-015-40531 | | | |
| 1000 Rio Brazos Rd., Aztec, NM 87410 | | vation Divisi | 1000 | | | | |
| Phone:(505) 334-6178 Fax:(505) 334-6170 <u>District IV</u> | 1220 S. S | t Francis Dr | | 5. Indicate Type of Lease | | | |
| 1220 S. St. Francis Dr., Santa Fe, NM 87505 Phone: (505) 476-3470 Fax: (505) 476-3462 Santa Fe, NM 87505 | | | S | | | | |
| | | | 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 DIFFRENT RESERVIOR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH | | | | 7. Lesse Name or Unit Agreement Name ROO 22 STATE | | | |
| PROPOSALS.) 1. Type of Well: O | | | | | 8. Well Number 009 | | |
| 2. Name of Operator | | | | 9. OGRID Number | | | |
| OXY USA INC | | | | | 16696 | | |
| 3. Address of Operator | | | * | 10. Pool name o | r Wildcat | | |
| PO Box 4294 | Houston, TX 77210 | | | | | | |
| 4. Well Location 330 feet for Unit Letter M 330 feet for Section 22 Township | 17\$ | Range 28E | feet from theNMPM | W tine Eddy | County | | |
| | 11. Elevation (Show wh | | L, etc.) | | | | |
| | | 597 GR | | | | | |
| Pit or Below-grade Tank Application or Clos | STATE AND ADDRESS OF THE PARTY | | | | | | |
| Pit Type Depth to Groundwater Pit Liner Thickness: mil E | Distance from nearest selow-Grade Tank: Volume_ | | Construction M | | ater | | |
| NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK TEMPORARILY ABANDON CHANGE OF PLANS COMMENCE DRILLING OPN PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB Other: Drilling/Cement | | | | | . CASING | | |
| 13. Describe proposed or completed operations. ((work.) SEE RULE 1103. For Multiple Completic ROO 22 STATE #9 04/28/2013 – SPUD 11" SURFACE HOLE @ 4'YLD; CIRCULATED 62 SX TO SURFACE HOLE @ 4'YLD; CIRCULATED 62 SX TO SURFACE PRODUCTION HOLE. 05/02/2013 – TD PRODUCTION HOLE 05/03/2013 – RUN 5.5" 17# L80 PRODUCTION SURFACE. TOC = 0". RELEASED IT | ns: Attach wellbore diagram E. 38'. RAN 8.625" 24# J5 CE. TOC = 0'. CE CASING @ 2065 P3 @ 4953'. ICTION CASING TO 4 | of proposed completion SURFACE CASI SI – 30 MIN – GOO | n or recompletion | i. CEMENTED GAN DRILLII | W/ 210 SX 1.34 NG 7.875" | | |
| Casing and Cement Program Date String Type Fluid Type Hod Siz 04/29/13 Surf FreshWater 1 05/03/13 Prod Brine 7.87 | e Size Ib/ft Gra 1 8.625 24 J5 | 5 0 438 | Sacks Yield 210 1.34 830 2.43 | Class Dpth | | | |
| I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines \square , a general permit \square or an (attached) alternative OCD-approved plan \square . SIGNATURE Electronically Signed TITLE DATE 7/11/2013 | | | | | | | |
| Type or print name KAREN M SINA For State Use Only: | E-mail addres | s <u>karen_sinard@oxy</u> | .com Tele | phone No. 71 | 13-300-3483 | | |
| APPROVED BY: Randy Dade | TITLE D | istrict Supervisor | | DATE 7/11/ | 2013 10:52:13 AM | | |