

Submit 1 Copy To Appropriate District Office
 District I
 1625 N. French Dr., Hobbs, NM 88240
 District II
 1301 W. Grand Ave., Artesia, NM 88210
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 October 13, 2009

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

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 type="checkbox"/> Gas Well <input type="checkbox"/> Other CO₂ PRODUCER		WELL API NO. 30-021-20371
2. Name of Operator OXY USA Inc.		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
3. Address of Operator P.O. Box 303, AMISTAD, NM 88410		6. State Oil & Gas Lease No. LG-4610
4. Well Location Unit Letter G : 1700 feet from the NORTH line and 1700 feet from the EAST line Section 32 Township 18N Range 32E NMPM HARDING County		7. Lease Name or Unit Agreement Name BRAVO DOME CARBON DIOXIDE GAS UNIT (BDCDGU)
11. Elevation (Show whether DR, RKB, RT, GR, etc.) GL: 4593.6'		8. Well Number 091 9. OGRID Number 16696 10. Pool name or Wildcat BRAVO DOME CARBON DIOXIDE GAS UNIT 640 ACRE AREA

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input checked="" type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/>		SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <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.

WELL PRODUCTION HAS DECLINED TO A MARGINAL STATUS

PROPOSED WORK:
 SET UP BRIDGE PLUG ON WIRELINE @ 2235' (CROSSOVER FIBERGLASS TO STEEL).
 DUMP 5 SX CEMENT.
 TEST CASING TO 550 PSI FOR 30 MINUTES- RECORD ON CHART.
 ISOLATE WELLHEAD FROM COLLECTION SYSTEM.

WELLBORE SCHEMATICS:
 SURFACE: 8 5/8" SET @ 708' WITH 400 SX, CIRCULATED 32.5 SX TO SURFACE.
 PRODUCTION: 5 1/2" SET @ 2345, STEEL: 2235.6' - 2345'; FG: 2235.6 TO SURFACE WITH 750 SX, CIRCULATED 166 SX TO SURFACE

Spud Date: Rig Release Date:

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

SIGNATURE *Albert Giussani* TITLE SR ENG ADVISOR DATE 06/02/2016

Type or print name AL GIUSSANI E-mail address: albert_giussani@oxy.com PHONE: 806-638-1296
For State Use Only

APPROVED BY: *Will Jones* TITLE DISTRICT SUPERVISOR DATE 6/2/16
 Conditions of Approval (if any):