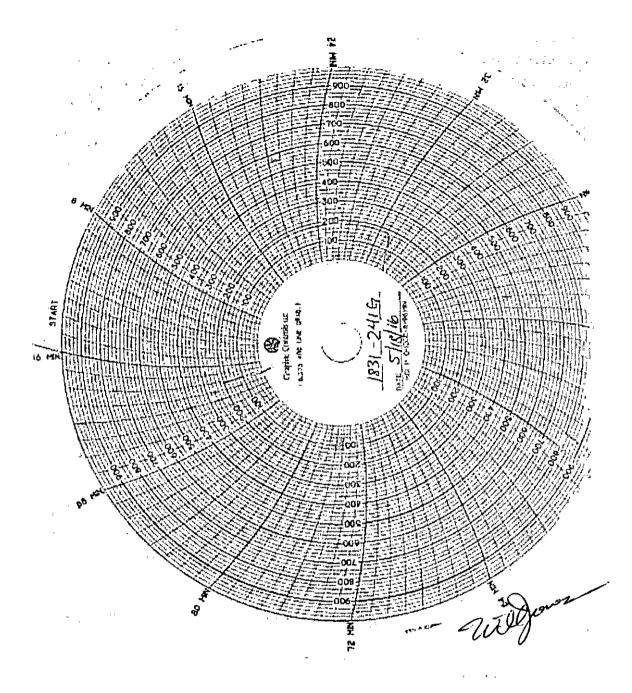
Submit 1 Copy To Appropriate District Office State of New Mexico	Form C-103 October 13, 2009
District Energy, Minerals and Natural Resources WE	LL API NO.
District II 1301 W. Grand Ave., Artesia, NM 88210 OIL CONSERVATION DIVISION 5. I	30-021 -20420 ndicate Type of Lease
1000 Rio Brazos Rd Azice, NM 87410	STATE FEE
1220 S. St. Francis Dr., Santa Fe, NM	State Oil & Gas Lease No. L05869
	ease Name or Unit Agreement Name
(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.)	RAVO DOME CARBON DIOXIDE GAS UNIT (BDCDGU)
1. Type of Well: Oil Well Gas Well Other CO2 PRODUCER 8. V	Well Number 241
	OGRID Number 16696
OXY USA Inc. 3. Address of Operator 10.	Pool name or Wildcat
ACR	VO DOME CARBON DIOXIDE GAS UNIT 160 E AREA
4. Well Location Unit LetterG:1700feet from theNORTH_ line and1700_feet from theEASTline	
Section 24 Township 18N Range 31E NM	
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	
GL: 4523.4'	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING	
TEMPORARILY ABANDON	
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB DOWNHOLE COMMINGLE	
_	
OTHER: OTHER: TEMPORARILY ABANDON 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.	
PRESSURE TESTED 5 1/2" PRODUCTION CASING TO 515 PSI FOR 30 MINUTES.	
COMPOSITE BRIDGE PLUG SET @ 2220' ON 6/13/2011	
SEE ENCLOSED CHART AND SUMMARY NMOCD STAFF ON LOCATION - CHART RECORDER SET FOR 3000 PSI-CHART FOR 1000 PSI, ACTUAL PRESSURE IS 3	
TIMES RECORDED PRESSURE	
WELLBORE SCHEMATICS: SURFACE: 8 5/8" SET @ 701' WITH 400 SX	
PRODUCTION: 5 1/4" SET @ 2378", WITH 450 SX	
Spud Date: Rig Release Date: 5/18/2016	2016
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
SIGNATURE TITLE SR ENG ADVISOR DATE 06/02/2016	
Type or print name AD GIUSSANI E-mail address: albert_giussani@oxy.com PHONE: 806:638-1296 For State Use Only	
APPROVED BY: William TITLE DIST IV Sufamian DATE 6/15/16	
Conditions of Approval (if any):	



831-2416

SOOF chart Recorder spring

96 min. Chart + clock
Itheller

Brion Holladay

API# 30-021-20420 TEST PESSURE - 515# tor 30 win