

Submit To Appropriate District Office Two Copies <b>District I</b> 1625 N. French Dr., Hobbs, NM 88240 <b>District II</b> 811 S. First St., Artesia, NM 88210 <b>District III</b> 1000 Rio Brazos Rd., Aztec, NM 87410 <b>District IV</b> 1220 S. St. Francis Dr., Santa Fe, NM 87505	<b>State of New Mexico</b> <b>Energy, Minerals and Natural Resources</b>  <b>Oil Conservation Division</b> <b>1220 South St. Francis Dr.</b> <b>Santa Fe, NM 87505</b>	<b>Form C-105</b> Revised August 1, 2011  1. WELL API NO. <b>30-025-45930</b>  2. Type of Lease <input checked="" type="checkbox"/> STATE <input type="checkbox"/> FEE <input type="checkbox"/> FED/INDIAN 3. State Oil & Gas Lease No.								
<b>WELL COMPLETION OR RECOMPLETION REPORT AND LOG</b>										
4. Reason for filing:  <input checked="" type="checkbox"/> <b>COMPLETION REPORT</b> (Fill in boxes #1 through #31 for State and Fee wells only)  <input type="checkbox"/> <b>C-144 CLOSURE ATTACHMENT</b> (Fill in boxes #1 through #9, #15 Date Rig Released and #32 and/or #33; attach this and the plat to the C-144 closure report in accordance with 19.15.17.13.K NMAC)		5. Lease Name or Unit Agreement Name <b>Avogato 30-31 State Com</b>  6. Well Number: <b>34H</b>								
7. Type of Completion: <input checked="" type="checkbox"/> NEW WELL <input type="checkbox"/> WORKOVER <input type="checkbox"/> DEEPENING <input type="checkbox"/> PLUGBACK <input type="checkbox"/> DIFFERENT RESERVOIR <input type="checkbox"/> OTHER										
8. Name of Operator <b>OXY USA Inc.</b>		9. OGRID <b>16696</b>								
10. Address of Operator <b>PO Box 4294    Houston, TX 77210</b>		11. Pool name or Wildcat <b>Red Tank; Bone Spring, East</b>								
12. Location	Unit Ltr	Section	Township	Range	Lot	Feet from the	N/S Line	Feet from the	E/W Line	County
Surface:	B	30	22S	33E		240	N	1820	E	Lea
BH:	O	31	22S	33E		22	S	1998	E	Lea
13. Date Spudded <b>06/02/2019</b>	14. Date T.D. Reached <b>10/27/2019</b>	15. Date Rig Released <b>11/01/2019</b>		16. Date Completed (Ready to Produce) <b>12/09/2019</b>			17. Elevations (DF and RKB, RT, GR, etc.) <b>3683 GR</b>			
18. Total Measured Depth of Well <b>22147</b>		19. Plug Back Measured Depth <b>22109</b>		20. Was Directional Survey Made? <b>Yes</b>			21. Type Electric and Other Logs Run <b>Gamma Ray</b>			
22. Producing Interval(s), of this completion - Top, Bottom, Name <b>11807' - 21998'</b>										
<b>23. CASING RECORD (Report all strings set in well)</b>										
CASING SIZE		WEIGHT LB./FT.		DEPTH SET		HOLE SIZE		CEMENTING RECORD		AMOUNT PULLED
13 3/8		54.5		1050		17 1/2		1340		0
9 5/8		40		6422		12 1/4		1620		0
7 5/8		26.4		11265		8 1/2		255		0
5 1/2		20		22122		6 3/4		795		0
<b>24. LINER RECORD</b>										
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN						
				2 3/8						
<b>25. TUBING RECORD</b>										
SIZE	DEPTH SET		PACKER SET							
	11993									
26. Perforation record (interval, size, and number) <b>11807' - 21998' in 51 stages w/ 1411 shots</b>						27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC.				
DEPTH INTERVAL						AMOUNT AND KIND MATERIAL USED				
11807' - 21998'						439443 slickwater, 1235 bbls 7.5% acid & 25457661 lbs sand				
<b>28. PRODUCTION</b>										
Date First Production <b>01/01/2020</b>		Production Method (Flowing, gas lift, pumping - Size and type pump) <b>Gas Lift</b>				Well Status (Prod. or Shut-in) <b>Prod</b>				
Date of Test <b>01/04/2020</b>	Hours Tested <b>24</b>	Choke Size <b>24</b>	Prod'n For Test Period	Oil - Bbl <b>3580</b>	Gas - MCF <b>6672</b>	Water - Bbl. <b>9010</b>	Gas - Oil Ratio <b>1864</b>			
Flow Tubing Press.	Casing Pressure <b>3408</b>	Calculated 24-Hour Rate	Oil - Bbl. <b>3580</b>	Gas - MCF <b>6672</b>	Water - Bbl. <b>9010</b>	Oil Gravity - API - (Corr.)				
29. Disposition of Gas (Sold, used for fuel, vented, etc.) <b>To be sold</b>						30. Test Witnessed By				
31. List Attachments <b>C103, C104, C102, WBD, Log Header</b>										
32. If a temporary pit was used at the well, attach a plat with the location of the temporary pit.										
33. If an on-site burial was used at the well, report the exact location of the on-site burial:										
Latitude			Longitude			NAD 1927 1983				
I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief										
Signature <i>April Santos</i>			Printed Name April Santos		Title Regulatory Specialist		Date 3/10/2020			
E-mail Address April_Hood@OXY.com										

## INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Division not later than 20 days after the completion of any newly-drilled or deepened well and not later than 60 days after completion of closure. When submitted as a completion report, this shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, items 11, 12 and 26-31 shall be reported for each zone.

**INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE**

Southeastern New Mexico		Northwestern New Mexico	
T. Rustler 1006	T. Canyon	T. Ojo Alamo	T. Penn A"
T. Salado 1417	T. Strawn	T. Kirtland	T. Penn. "B"
B. Castille 3104	T. Atoka	T. Fruitland	T. Penn. "C"
T. Lamar 4891	T. Miss	T. Pictured Cliffs	T. Penn. "D"
T. Cherry Canyon 5754	T. Devonian	T. Cliff House	T. Leadville
T. Brushy Canyon 7156	T. Silurian	T. Menefee	T. Madison
T. Bone Springs 8773	T. Montoya	T. Point Lookout	T. Elbert
T. 1st Bone Springs 9812	T. Simpson	T. Mancos	T. McCracken
T. 2nd Bone Springs 10173	T. McKee	T. Gallup	T. Ignacio Otzte
T. 3rd Bone Ssrinds 11070	T. Ellenburger	Base Greenhorn	T. Granite
T. Blinberry	T. Gr. Wash	T. Dakota	
T. Tubb	T. Delaware Sand	T. Morrison	
T. Drinkard	T. Bone Springs	T. Todilto	
T. Abo	T.	T. Entrada	
T. Wolfcamp	T.	T. Wingate	
T. Penn	T.	T. Chinle	
T. Cisco (Bough C)	T.	T. Permian	

## OIL OR GAS SANDS OR ZONES

**No. 1, from.....to.....**

**No. 3, from.....to.....**

No. 2, from.....to.....

No. 4, from.....to.....

## IMPORTANT WATER SANDS

**Include data on rate of water inflow and elevation to which water rose in hole.**

No. 1, from.....to.....feet.....

**No. 2, from.....to.....feet.....**

**No. 3, from.....to.....feet.....**

**LITHOLOGY RECORD** (Attach additional sheet if necessary)

From	To	Thickness In Feet	Lithology

From	To	Thickness In Feet	Lithology