

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- 025- 32436 ✓
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/> FD <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. NM 81272
7. Lease Name or Unit Agreement Name Prize Federal ✓
8. Well Number 4
9. OGRID Number 16696
10. Pool name or Wildcat Red Tank Delaware, West

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 ☐ Gas Well ☐ Other Injection

2. Name of Operator OXY USA Inc. HOBBS OCD

3. Address of Operator P.O. Box 50250 Midland, TX 79710 AUG 03 2014

4. Well Location  
Unit Letter H : 1830 feet from the north RECEIVED 760 feet from the east line  
Section 27 Township 22S Range 32E ✓ NMPM County Lea

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3660'

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 type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <u>MIT</u> <input checked="" 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.

TD- 8740' PBTD- 8660' Perfs- 6832-8338' Pkr- 6792'-8301'

1. Notified NMOCD of casing integrity test 24hrs in advance.

2. RU pump truck 6/10/14, circulate well with treated water, pressure test casing to SID #  
for 30 min.

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

TITLE

Sr. Regulatory Advisor

DATE

7/29/14

Type or print name

David Stewart

E-mail address:

david\_stewart@oxy.com

PHONE:

432-685-5717

For State Use Only

APPROVED BY:

Beth L. Linares

TITLE

Staff Manager

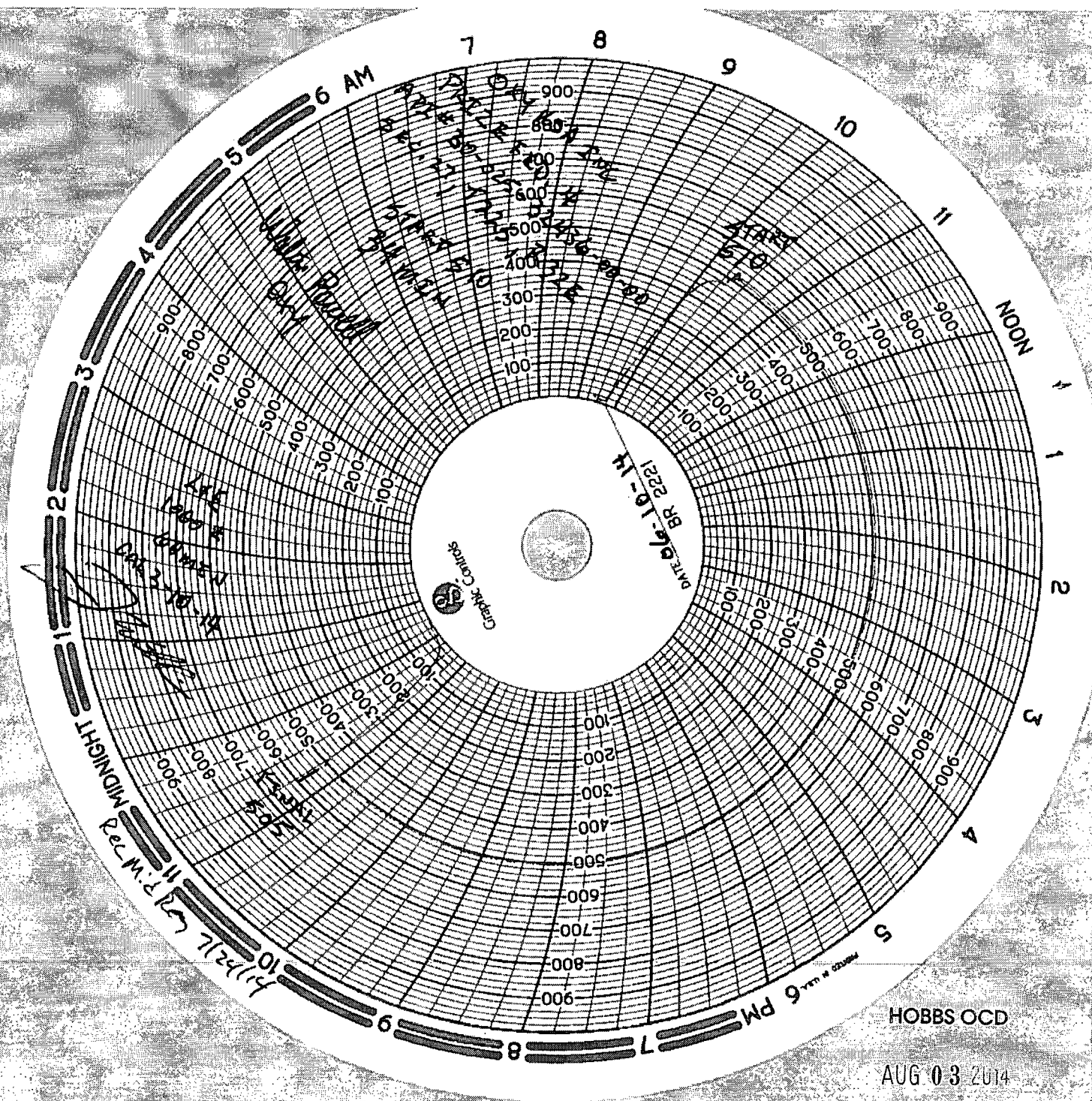
DATE

8/8/2014

Conditions of Approval (if any):

FOR RECORD ONLY

AUG 11 2014



HOBBS OCD

AUG 03 2014

RECEIVED

FOR RECORD ONLY

BS 8/8/2014

1

OXY USA Inc.  
Prize Federal #4  
API No. 30-025-32436

17-1/2" hole @ 805'  
13-3/8" csg @ 805'  
w/ 900sx-TOC-Surf-Circ

FOR RECORD ONLY

*BS 8/8/2014*

11" hole @ 4512'  
8-5/8" csg @ 4512'  
w/ 1800sx-TOC-Surf-Circ

HOBBS OCD

AUG 03 2014

RECEIVED

2-3/8" tbg & pkr @ 6792' & 8301'

Perfs @ 6832-6912'

Perfs @ 7462-7470'

7-7/8" hole @ 8740'  
5-1/2" csg @ 8740'  
DVT @ 6587'

w/ 1465sx-TOC-3077-CBL

Perfs @ 8358-8388'

PB-8660'

TD-8740'