

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
HOBBS OCD
OIL CONSERVATION DIVISION
MAR 29 2017
1220 South St. Francis Dr.
Santa Fe, NM 87505
RECEIVED

Form C-103
Revised July 18, 2013

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.)		WELL API NO. 30-025-33082 /
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> /
2. Name of Operator OXY USA Inc. /		6. State Oil & Gas Lease No. V-3527
3. Address of Operator P.O. Box 50250 Midland, TX 79710		7. Lease Name or Unit Agreement Name Red Tank 31 State /
4. Well Location Unit Letter <u>D</u> : <u>330</u> feet from the <u>North</u> line and <u>330</u> feet from the <u>West</u> line Section <u>31</u> Township <u>22S</u> Range <u>33E</u> NMPM County <u>Lea</u>		8. Well Number 1 /
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3758'		9. OGRID Number 16696 /
		10. Pool name or Wildcat Red Tank Delaware, West /

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

NOTICE OF INTE		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/> F	INT TO PA P&A NR <u>Am. X</u> P&A R _____	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/> C		COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/> M		CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: _____		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.

3/16/2017 RUPU, NU BOP & accumulator. RIH & set CIBP @ 5360', POOH.
3/17/2017 RIH w/ tbg & tag CIBP @ 5360', circ hole w/ 10# MLF, test csg to 1000#, held good. M&P 25sx CI C cmt from 5360-4982', calc. PUH to 4804', M&P 25sx CI C cmt, PUH, WOC.
3/20/2017 RIH w/ tbg & tag cmt @ 4410', POOH. RIH & set pkr @ 2467', RIH & perf @ 2785', EIR @ 2bpm @ 500#, M&P 30sx cmt, PUH, WOC. RIH & tag cmt @ 2668'. PUH & set pkr @ 552', RIH & perf @ 866', EIR @ 2bpm @ 0# circulating, M&P 30sx CI C cmt, ISIP-0#, PUH, WOC.
3/21/2017 RIH w/ tbg & tag cmt @ 730', POOH. RIH & perf @ 250', EIR @ 2bpm @ 500# w/ full circ. M&P 60sx CL C cmt, circ to surface. RD BOP & accumulator, RDPU.

Approved for Plugging of wellbore only. Liability under bond is retained pending restoration and completion of the C-103, Specific for Subsequent Report of Well Plugging, which may be found on the OCD web page under forms.
Restoration Due By 3-20-2018

Spud Date:

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

SIGNATURE David Stewart TITLE Sr. Regulatory Advisor DATE 3/24/17

Type or print name David Stewart E-mail address: david_stewart@oxy.com PHONE: 432-685-5717

For State Use Only

APPROVED BY: Mark Whitaker TITLE P.E.S. DATE 03-29-2017

Conditions of Approval (if any):