

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. 30-025-44062
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name RED TANK 30 31 STATE COM
8. Well Number 024H
9. OGRID Number 16696
10. Pool name or Wildcat
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3658 GR

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 checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator OXY USA INC.	
3. Address of Operator P.O. BOX 4294, HOUSTON, TX 77210	
4. Well Location Unit Letter A : 220 feet from the NORTH line and 290 feet from the EAST line Section 30 Township 22S Range 33E NMPM County LEA	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3658 GR	

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 checked="" 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: <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.

Spud 10-19-17
decide PA
10-26-17
PA
complete
10-27-17
RU swage to 13-3/8", M&P a total of 644sxs (156bbl) class C cmt w/ 2% CaCl2 & .25#/sx CelloFlake @ 4 bpm @ 150#, had cmt to surface after 136bbl, pump an additional 20bbl, WOC. Cement fell 8' on the backside, strapped down to 100' inside 13-3/8" csg, did not tag cmt. M&P a total of 68sxs (16.5bbl) class C cmt w/ 2% CaCl2 & .25#/sx CelloFlake, pump 15bbl down 13-3/8" csg and 1.5bbl received down backside, cmt to surface. RD spudder rig, cut off 13-3/8" csg & 20" line pipe, 3' below surface, weld plate on 13-3/8" w/ well information per NMOCD. Rig release 10/27/2017.

Spud Date:

10/19/2017

Rig Release Date:

10/27/2017

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

SIGNATURE

Sarah Chapman

TITLE REGULATORY SPECIALIST

DATE 04/25/2019

Type or print name SARAH CHAPMAN

E-mail address: SARAH_CHAPMAN@OXY.COM

PHONE: 713-350-4997

For State Use Only

APPROVED BY:

Kerry Fortner

TITLE

Compliance officer A

DATE

4-26-19

Conditions of Approval (if any):