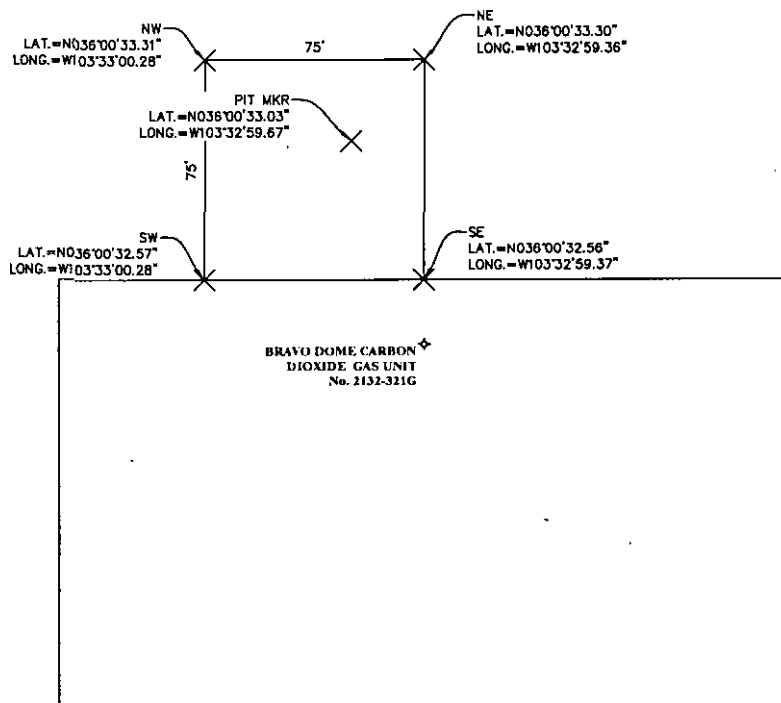


Submit To Appropriate District Office Two Copies District I 1625 N. French Dr., Hobbs, NM 88240 District II 811 S. First St., Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	State of New Mexico Energy, Minerals and Natural Resources Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, NM 87505	Form C-105 Revised August 1, 2011
		1. WELL API NO. <div style="text-align: right;">30-021-20638</div>
		2. Type of Lease <input type="checkbox"/> STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> FED/INDIAN
		3. State Oil & Gas Lease No.
WELL COMPLETION OR RECOMPLETION REPORT AND LOG		
4. Reason for filing: <input type="checkbox"/> COMPLETION REPORT (Fill in boxes #1 through #31 for State and Fee wells only) <input checked="" type="checkbox"/> C-144 CLOSURE ATTACHMENT (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 <div style="text-align: center;">BRAVO DOME CARBON DIOXIDE GAS UNIT</div>
		6. Well Number: <div style="text-align: right;">321 G</div>
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 <div style="text-align: center;">OXY USA Inc.</div>		9. OGRID <div style="text-align: right;">16696</div>
P.O. BOX 4294, HOUSTON, TEXAS 77210-4294		11. Pool name or Wildcat
12. Location	Unit Ltr	Section
Surface:		
BH:		
13. Date Spudded	14. Date T.D. Reached	15. Date Rig Released <div style="text-align: center;">8/11/2014</div>
		16. Date Completed (Ready to Produce) <div style="text-align: center;">10/14/2014</div>
		17. Elevations (DF and RKB, RT, GR, etc.)
18. Total Measured Depth of Well	19. Plug Back Measured Depth	20. Was Directional Survey Made?
		21. Type Electric and Other Logs Run
22. Producing Interval(s), of this completion - Top, Bottom, Name		
23. CASING RECORD (Report all strings set in well)		
CASING SIZE	WEIGHT LB./FT.	DEPTH SET
24. LINER RECORD		25. TUBING RECORD
SIZE	TOP	BOTTOM
26. Perforation record (interval, size, and number)		27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC.
		DEPTH INTERVAL AMOUNT AND KIND MATERIAL USED
28. PRODUCTION		
Date First Production		Production Method (Flowing, gas lift, pumping - Size and type pump)
		Well Status (Prod. or Shut-in)
Date of Test	Hours Tested	Choke Size
Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate
29. Disposition of Gas (Sold, used for fuel, vented, etc.)		30. Test Witnessed By
31. List Attachments		
32. If a temporary pit was used at the well, attach a plat with the location of the temporary pit. DEEP TRENCH USED ON SITE		
33. If an on-site burial was used at the well, report the exact location of the on-site burial:		
Latitude 36 00' 33.03" Longitude -103 32' 58.81" 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	Printed Name AL GIUSSANI Title ENGINEERING ADVISOR Date 12/03/2015	
E-mail Address albert_giussani@oxy.com		



SCALE= 1:50

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