

Submit 1 Copy To Appropriate District
Office
District I
1625 N French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., 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

Form C-103
October 13, 2009

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-059-20204
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name BRAVO DOME CARBON DIOXIDE GAS UNIT (BDCDGU)
8. Well Number 321 (SWD)
9. OGRID Number 16696
10. Pool name or Wildcat BRAVO DOME CARBON DIOXIDE GAS UNIT 640 ACRE AREA

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 **DISPOSAL WELL**

2. Name of Operator

OXY USA Inc.

3. Address of Operator

P.O. Box 303, AMISTAD, NM 88410

4. Well Location

Unit Letter **A** : **956** feet from the **NORTH** line and **956** feet from the **EAST** line
Section **32** Township **19N** Range **34E** NMPM **UNION** County

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

GL: 4912'

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
DOWNHOLE COMMINGLE ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐

OTHER: ☐

OTHER: Clean out to reestablish injection ☒

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.

SEE ENCLOSED JOB SUMMARY

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



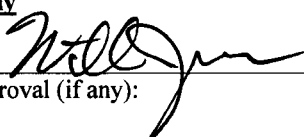
TITLE SR ENG ADVISOR

DATE 08/16/2018

Type or print name AL GIUSSANI E-mail address: albert_giussani@oxy.com PHONE: 806-638-1296

For State Use Only

APPROVED BY:



TITLE

Engineer

DATE

8/16/18

Conditions of Approval (if any):

JOB SUMMARY

BDCDGU 19 34 32 1 A

API: 30-059-20204

REMEDIAL WORK TO REESTABLISH INJECTIVITY

7/17/2018

8:00 Safety meeting and JSA's
8:30 mix 3 drums scale converter in 11 bbls of FW
10:00 Rig up Basic coil tbg unit
11:00 Go. In hole with. Coil tbg to 1850'
11:30 spot scale converter from 1850' to 2000'
12:30 pull coil tbg out and rig down
1:30 shut well in to let converter soak
2:30 Secure well and SDFD

7/18/2018

8:00 Safety meeting and JSA's
8:30 Rig up coil tbg and Basic acid pump
9:30 go in hole to 1850' coil. Tbg
10:00 Start pumping 1500gal of 15% NEFE- acid @ 1200# @ .4 bpm
11:30 Acid gone and flush pumped at .6 bpm and 2000#
12:30 Pump N2 thru coil to remove the water.
1:30 Shut in well and SDFD.

7/19/2018

8:00 safety meeting and JSA's
8:30 RD coil tbg unit and release
9:00 all equipment off location
9:30 Return well to disposal