

Submit 3 Copies To Appropriate District  
Office  
District I  
1625 N. French Dr., Hobbs, NM 87240  
District II  
811 South First, Artesia, NM 87210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION  
2040 South Pacheco  
Santa Fe, NM 87505

Form C-103  
Revised March 25, 1999

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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. 30-059-20410
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other CO2 Supply Well <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator OXY USA Inc. 16696		6. State Oil & Gas Lease No. ---
3. Address of Operator P.O. Box 50250 Midland, TX 79710-0250		7. Lease Name or Unit Agreement Name: Bravo Dome Carbon Dioxide Gas Unit 1934
4. Well Location Unit Letter J : 1673 feet from the south line and 1441 feet from the east line Section 22 Township 19N Range 34E NMPM County Union		8. Well No. 223
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 4795.2'		9. Pool name or Wildcat Bravo Dome Carbon Dioxide Gas 640

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
<b>NOTICE OF INTENTION TO:</b>	<b>SUBSEQUENT REPORT OF:</b>
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"/> PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER: <input type="checkbox"/>	OTHER: Completion <input checked="" type="checkbox"/>

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

See Other Side

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 Analyst DATE 8/5/03

Type or print name David Stewart Telephone No. 432-685-5717

(This space for State use)

APPROVED BY [Signature] TITLE DISTRICT SUPERVISOR DATE 8/8/03  
Conditions of approval, if any:

**BDCDGU 1934-223**

**7/17/03** CMIC: Randy Baker

MI & RU WL R Compensated Neutron Gamma-Ray Collar Log PBTD 2487'

**7/23/03**

MI & RUSU R 2.375 Tbg to 2475' Swb Well Dry P & LD Tbg RD& MOSU

Dump 8 BBL 15% HCL Acid + 4 BBL 6% KCL

MI & RU WL R 3.125 Perf Gun Perforate 2186' to 2232', 2238' to 2276', 2304' to 2354'  
with 4 DPJSPF @ .42" Hole = 548 Holes

Flow to Pit and well died

**08/02/03**

Frac Down Casing with 321 BBL Gel KCL mixed with 63 Tons of CO2

Containing 611 sx 12/20 Brady Sand

Max TP - 1717 psi Avg TP - 1420 psi Max IR - 49 BPM AIR - 42 BPM

ISIP - 857 psi 5 min SIP - 379 psi 10 min SIP - 274 psi 15 min SIP - 245 psi

Flow well to pit on .50" Choke

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