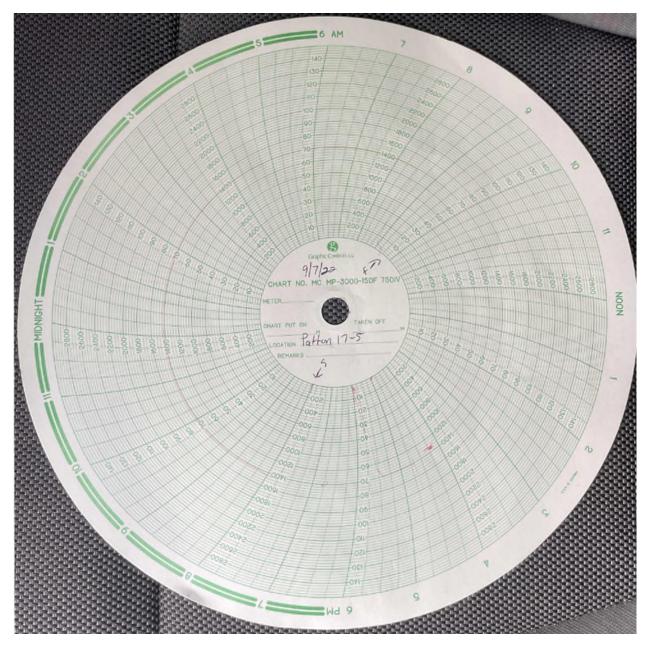
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| SIGNATURE Stephen Janacek TITLE REGULATORY ENGINEER DATE 9/29/2022 Type or print name STEPHEN JANACEK E-mail address: STEPHEN_JANACEK@OXY.COM PHONE: 713-493-1986 For State Use Only R Multic TITLE Petroleum Engineer DATE 09/30/2022 | | | | | |
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| Type or print name STEPHEN JANACEK E-mail address: STEPHEN_JANACEK@OXY.COM PHONE: 713-493-1986 For State Use Only APPROVED BY: Demoty TITLE Petroleum Engineer DATE 09/30/2022 | I hereby certify that the information | above is true and complete to the be | est of my knowledg | e and belief. | |
| For State Use Only APPROVED BY: Dean R Milline TITLE Petroleum Engineer DATE 09/30/2022 | signature <u>Stephen Janac</u> | ek | LATORY ENGIN | EERDATE | 0/29/2022 |
| APPROVED BY: Dean R Milline TITLE Petroleum Engineer DATE 09/30/2022 | Type or print name <u>STEPHEN J4</u> For State Use Only | ANACEK E-mail address | STEPHEN_JANA | CEK@OXY.COM PHONE | <u>: 713-493-1986</u> |
| | APPROVED BY: Dean R | Millure TITLE Petrol | eum Engineer | DATE 0 | 9/30/2022 |

PATTON MDP1 17 FEDERAL #005H

30-015-44444

CHART FOR MIT RAN ON 9/7/22 FOR CLGC GAS STORAGE

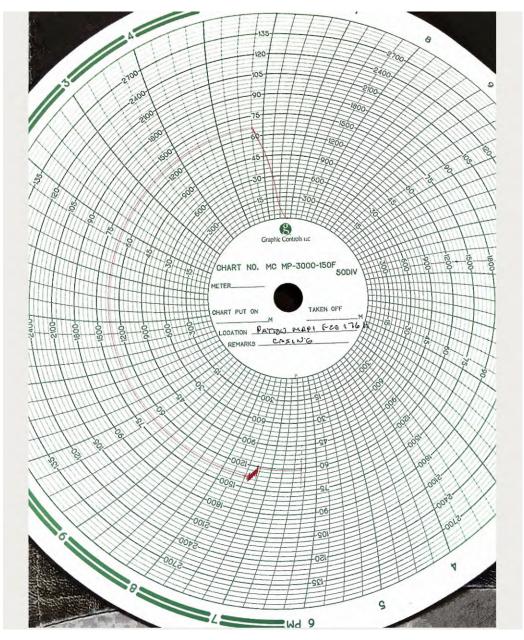


| Office | | ew Mexico | | Form C-103 of |
|--|---|---|---|--|
| <u>District I</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 | Energy, Minerals an | nd Natural Resources | WELL API NO. | Revised July 18, 2013 |
| <u>District II</u> – (575) 748-1283 | OIL CONSERVA | ATION DIVISION | 30-015-45079 | |
| 811 S. First St., Artesia, NM 88210 District III – (505) 334-6178 | | St. Francis Dr. | 5. Indicate Type of | _ |
| 1000 Rio Brazos Rd., Aztec, NM 87410 | | NM 87505 | STATE | FEE |
| <u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505 | Sana re, | INIM 87303 | 6. State Oil & Gas I | ease No. |
| | TICES AND REPORTS ON | WELLS | 7. Lease Name or U | nit Agreement Name |
| (DO NOT USE THIS FORM FOR PROP DIFFERENT RESERVOIR. USE "APPI | OSALS TO DRILL OR TO DEEPE | N OR PLUG BACK TO A | | P1 17 FEDERAL |
| PROPOSALS.) 1. Type of Well: Oil Well | Gas Well 🗌 Other | | 8. Well Number 17 | '6H |
| 2. Name of Operator | | | 9. OGRID Number | |
| OXY USA INC. | | | 16696 | |
| 3. Address of Operator | | | 10. Pool name or W | |
| PO BOX 4294, HOUSTO | N, TX 77210 | | COTTON DRAV | V; BONE SPRING |
| 4. Well Location | | | | |
| Unit Letter A | : 772 feet from the N | | | he <u>EAST</u> line |
| Section 17 | Township 24S | Range 31E | NMPM | County EDDY |
| | 11. Elevation (Show when 3546' GL | ther DR, RKB, RT, GR, etc. |) | |
| 12. Check | Appropriate Box to Indi | icate Nature of Notice, | Report or Other Da | ata |
| NOTICE OF I | NTENTION TO: | SUE | SEQUENT REPO | DRT OF: |
| PERFORM REMEDIAL WORK | PLUG AND ABANDON | REMEDIAL WOP | RK 🗌 AI | TERING CASING |
| TEMPORARILY ABANDON | CHANGE PLANS | COMMENCE DR | ILLING OPNS. | AND A |
| PULL OR ALTER CASING | MULTIPLE COMPL | CASING/CEMEN | Т ЈОВ | |
| DOWNHOLE COMMINGLE |] | | | |
| CLOSED-LOOP SYSTEM | CLGC INJECTION | | | _ |
| OTHER: | 1 . 1 | | 1 | |
| 13. Describe proposed or com of starting any proposed or proposed completion or re | work). SEE RULE 19.15.7.14 | | | |
| PER ORDER R-22208: | | | | |
| | | | | |
| | 22 AND IS PENDING APPRO | | 3317. IT IS ATTACHED | |
| C. EQUIPMENT IS INSTA | ND THE THE OCD DEMONST ND THE TIE-IN OF THE PRO LLED TO LIMIT THE INJECT MONITOR THE CASING ANN | DDUCTION CASING WITH | CEMENT AND CEMENT THE NEXT PRIOR CA THAN OR EQUAL TO | NT BOND OF THE SING. THE MASP. |
| PRODUCTION CASING A C. EQUIPMENT IS INSTA D. THE EQUIPMENT TO I | ND THE TIE-IN OF THE PROL | DDUCTION CASING WITH ION PRESSURE TO LESS NULUS PRESSURE(S) AN | CEMENT AND CEMENT THE NEXT PRIOR CA THAN OR EQUAL TO | NT BOND OF THE SING. THE MASP. |
| PRODUCTION CASING A C. EQUIPMENT IS INSTA D. THE EQUIPMENT TO I | ND THE TIE-IN OF THE PROLLED TO LIMIT THE INJECT MONITOR THE CASING AND | DDUCTION CASING WITH ION PRESSURE TO LESS NULUS PRESSURE(S) AN | CEMENT AND CEMENT THE NEXT PRIOR CA THAN OR EQUAL TO | NT BOND OF THE SING. THE MASP. |
| PRODUCTION CASING A C. EQUIPMENT IS INSTA D. THE EQUIPMENT TO I | ND THE TIE-IN OF THE PROLLED TO LIMIT THE INJECT MONITOR THE CASING AND | DDUCTION CASING WITH ION PRESSURE TO LESS NULUS PRESSURE(S) AN | CEMENT AND CEMENT THE NEXT PRIOR CA THAN OR EQUAL TO | NT BOND OF THE SING. THE MASP. |
| PRODUCTION CASING A C. EQUIPMENT IS INSTA D. THE EQUIPMENT TO I | ND THE TIE-IN OF THE PROLLED TO LIMIT THE INJECT MONITOR THE CASING AND | DDUCTION CASING WITH ION PRESSURE TO LESS NULUS PRESSURE(S) AN | CEMENT AND CEMENT THE NEXT PRIOR CA THAN OR EQUAL TO | NT BOND OF THE SING. THE MASP. |
| PRODUCTION CASING A C. EQUIPMENT IS INSTA D. THE EQUIPMENT TO I | ND THE TIE-IN OF THE PROULLED TO LIMIT THE INJECT MONITOR THE CASING AND ced into service per R- | DDUCTION CASING WITH TION PRESSURE TO LESS NULUS PRESSURE(S) AN | CEMENT AND CEMEN THE NEXT PRIOR CA THAN OR EQUAL TO D INJECTION RATE IS | NT BOND OF THE SING. THE MASP. |
| PRODUCTION CASING A C. EQUIPMENT IS INSTA D. THE EQUIPMENT TO I | ND THE TIE-IN OF THE PROULLED TO LIMIT THE INJECT MONITOR THE CASING AND ced into service per R- | DDUCTION CASING WITH TION PRESSURE TO LESS NULUS PRESSURE(S) AN | CEMENT AND CEMEN THE NEXT PRIOR CA THAN OR EQUAL TO D INJECTION RATE IS | NT BOND OF THE SING. THE MASP. |
| PRODUCTION CASING A C. EQUIPMENT IS INSTA D. THE EQUIPMENT TO I The Well may be place | ND THE TIE-IN OF THE PROULLED TO LIMIT THE INJECT MONITOR THE CASING AND ced into service per R-2 n above is true and complete | DDUCTION CASING WITH TON PRESSURE TO LESS NULUS PRESSURE(S) AN 22208 | CEMENT AND CEMENT THE NEXT PRIOR CA S THAN OR EQUAL TO D INJECTION RATE IS ge and belief. | NT BOND OF THE SING. THE MASP. INSTALLED. |

PATTON MDP1 17 FEDERAL #176H

30-015-45079

CHART FOR MIT RAN ON 7/8/22 FOR CLGC GAS STORAGE



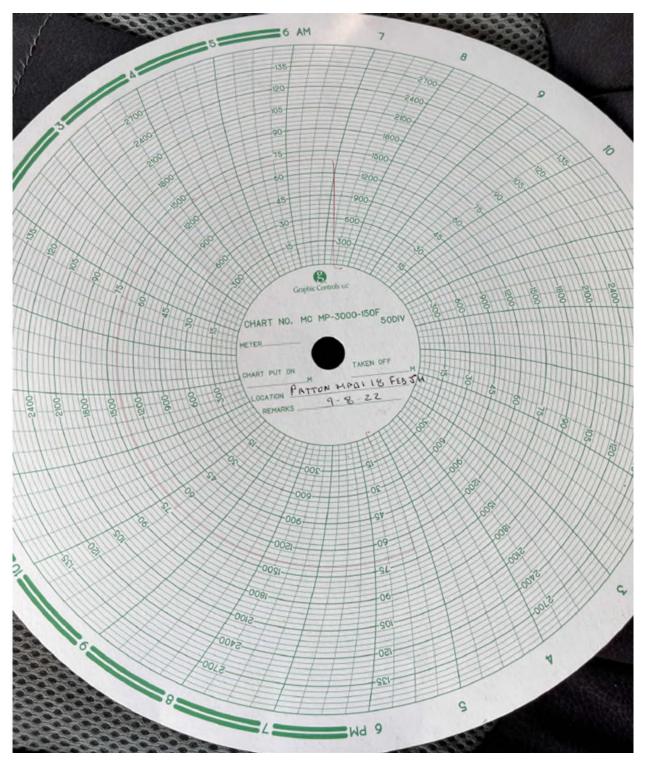
| Contractor Copy P: 2/30/2022 10:11:11 AM | State of New M | Iexico | | Form C-903 0 |
|---|---|--------------------------|--------------------------|-----------------------|
| District I – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 | Energy, Minerals and Na | tural Resources | WELL API NO. | Revised July 18, 2013 |
| <u>District II</u> – (575) 748-1283 | OIL CONSERVATIO | N DIVISION | 30-015-44272 | |
| 811 S. First St., Artesia, NM 88210 District III – (505) 334-6178 | 1220 South St. Fra | | 5. Indicate Type of | |
| 1000 Rio Brazos Rd., Aztec, NM 87410 | | | STATE [| |
| <u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505 | Santa Fe, NM 8 | 87303 | 6. State Oil & Ga | s Lease No. |
| | AND REPORTS ON WELL | S | 7. Lease Name or | Unit Agreement Name |
| (DO NOT USE THIS FORM FOR PROPOSALS T DIFFERENT RESERVOIR. USE "APPLICATION | PATTON ME | P1 18 FEDERAL | | |
| PROPOSALS.) 1. Type of Well: Oil Well Gas W | Vell 🗌 Other | | 8. Well Number 005H | |
| 2. Name of Operator OXY USA INC. | | | 9. OGRID Number 16696 | er |
| 3. Address of Operator | | | 10. Pool name or | Wildcat |
| PO BOX 4294, HOUSTON, TX | 77210 | | | W; BONE SPRING |
| 4. Well Location | | | | |
| Unit Letter A : 150 | feet from the NORTH | I line and 28 | 5feet from | n the EAST line |
| Section 18 | Township 24S | Range 31E | NMPM | County EDDY |
| 11. 3523 | Elevation (Show whether D | R, RKB, RT, GR, etc. |) | |
| 12. Check Appro | priate Box to Indicate | Nature of Notice, | Report or Other | Data |
| NOTICE OF INTEN | TION TO: | SUB | SEQUENT REP | PORT OF: |
| PERFORM REMEDIAL WORK D PLU | G AND ABANDON | REMEDIAL WOR | K 🗌 | ALTERING CASING |
| TEMPORARILY ABANDON | NGE PLANS | COMMENCE DR | ILLING OPNS. | P AND A |
| PULL OR ALTER CASING 🛛 MUL | | CASING/CEMEN | т јов 🛛 | |
| | | | | |
| CLOSED-LOOP SYSTEM C C | LGC STORAGE | OTHER: | MIT FOR CLG | с п |
| Describe proposed or completed of of starting any proposed work). S proposed completion or recomple | perations. (Clearly state al EE RULE 19.15.7.14 NMA | | | |
| PER ORDER R-22208: | | | | |
| A. MIT WAS RAN ON 9/8/22 AND | | | | |
| B. A CBL IS ON RECORD WITH | | | | |
| PRODUCTION CASING AND TH | E TIE-IN OF THE PRODUC | TION CASING WITH | I THE NEXT PRIOR | CASING. |
| C. EQUIPMENT IS INSTALLED T | | | | |
| D. THE EQUIPMENT TO MONITO | JR THE CASING ANNULU | SPRESSURE(S) AN | D INJECTION RATE | IS INSTALLED. |
| The Well may be placed into | o service per R-2220 | 8 | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| hereby certify that the information above | is true and complete to the | best of my knowledg | e and belief. | |
| ignature <u>Stephen Janacek</u> | TITLE_REG | ULATORY ENGIN | EERDA | TE <u>9/29/2022</u> |
| Type or print name <u>STEPHEN JANACE</u> For State Use Only | K E-mail addre | ess: <u>STEPHEN_JANA</u> | CEK@OXY.COM PH | ONE: 713-493-1986 |
| APPROVED BY: Dean R M | | | | |

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PATTON MDP1 18 FEDERAL #005H

30-015-44272

CHART FOR MIT RAN ON 9/8/22 FOR CLGC GAS STORAGE

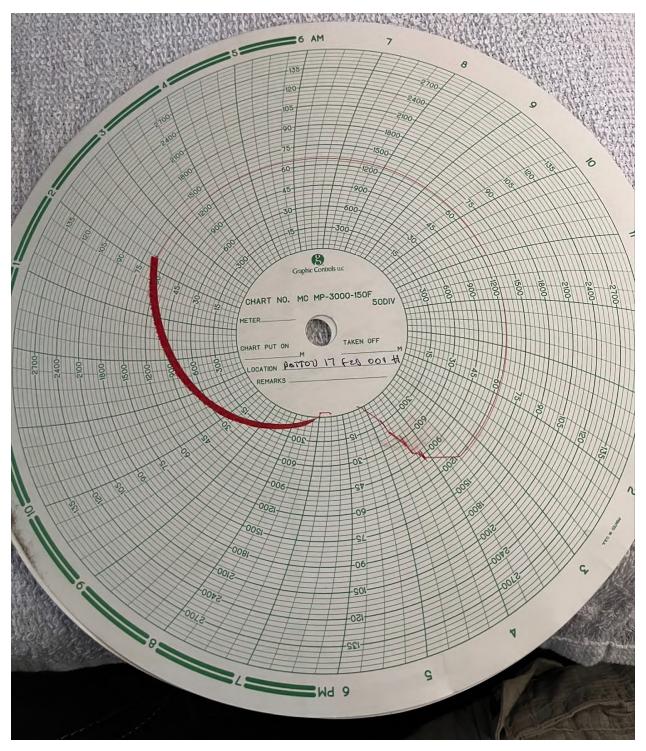


| Office | State of New Mexico | Form C-103 |
|---|---|--|
| <u>District I</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 | Energy, Minerals and Natural Resourc | WELL API NO. |
| District II – (575) 748-1283 | OIL CONSERVATION DIVISIO | N 30-015-44459 |
| 811 S. First St., Artesia, NM 88210 District III – (505) 334-6178 | 1220 South St. Francis Dr. | 5. Indicate Type of Lease |
| 1000 Rio Brazos Rd., Aztec, NM 87410 | Santa Fe, NM 87505 | STATE FEE |
| <u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505 | Santa Pe, 1010 87505 | 6. State Oil & Gas Lease No. |
| | FICES AND REPORTS ON WELLS | 7. Lease Name or Unit Agreement Name |
| DIFFERENT RESERVOIR. USE "APPL | OSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A JICATION FOR PERMIT" (FORM C-101) FOR SUCH | |
| PROPOSALS.) 1. Type of Well: Oil Well | Gas Well 🗍 Other | 8. Well Number 001H |
| 2. Name of Operator | | 9. OGRID Number |
| OXY USA INC. | | 16696 |
| 3. Address of Operator | | 10. Pool name or Wildcat |
| PO BOX 4294, HOUSTON | N, TX 77210 | COTTON DRAW; BONE SPRING |
| 4. Well Location | | |
| Unit Letter M | : 170 feet from the SOUTH line at | nd <u>846</u> feet from the <u>WEST</u> line |
| Section 8 | Township 24S Range 31E | NMPM County EDDY |
| | 11. Elevation (Show whether DR, RKB, RT, G 3529' GL | GR, etc.) |
| PERFORM REMEDIAL WORK TEMPORARILY ABANDON PULL OR ALTER CASING DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM OTHER: 13. Describe proposed or com of starting any proposed w proposed completion or re PER ORDER R-22208 A. MIT WAS RAN ON 7/11 | CHANGE PLANS □ COMMENC MULTIPLE COMPL □ CASING/C CLGC STORAGE □ □ upleted operations. (Clearly state all pertinent deta vork). SEE RULE 19.15.7.14 NMAC. For Multiple | CE DRILLING OPNS. P AND A |
| PRODUCTION CASING A C. EQUIPMENT IS INSTA D. THE EQUIPMENT TO N | ND THE TIE-IN OF THE PRODUCTION CASING LLED TO LIMIT THE INJECTION PRESSURE TO MONITOR THE CASING ANNULUS PRESSURE(| WITH THE NEXT PRIOR CASING. D LESS THAN OR EQUAL TO THE MASP. |
| PRODUCTION CASING A C. EQUIPMENT IS INSTA D. THE EQUIPMENT TO N | LLED TO LIMIT THE INJECTION PRESSURE TO | WITH THE NEXT PRIOR CASING. D LESS THAN OR EQUAL TO THE MASP. |
| PRODUCTION CASING A C. EQUIPMENT IS INSTA D. THE EQUIPMENT TO N | LLED TO LIMIT THE INJECTION PRESSURE TO MONITOR THE CASING ANNULUS PRESSURE(| WITH THE NEXT PRIOR CASING. D LESS THAN OR EQUAL TO THE MASP. |
| PRODUCTION CASING A C. EQUIPMENT IS INSTA D. THE EQUIPMENT TO N | LLED TO LIMIT THE INJECTION PRESSURE TO MONITOR THE CASING ANNULUS PRESSURE(| WITH THE NEXT PRIOR CASING. D LESS THAN OR EQUAL TO THE MASP. |
| PRODUCTION CASING A C. EQUIPMENT IS INSTA D. THE EQUIPMENT TO N | LLED TO LIMIT THE INJECTION PRESSURE TO MONITOR THE CASING ANNULUS PRESSURE(| WITH THE NEXT PRIOR CASING. D LESS THAN OR EQUAL TO THE MASP. |
| PRODUCTION CASING A C. EQUIPMENT IS INSTA D. THE EQUIPMENT TO N The well may be place | LLED TO LIMIT THE INJECTION PRESSURE TO MONITOR THE CASING ANNULUS PRESSURE(| WITH THE NEXT PRIOR CASING. D LESS THAN OR EQUAL TO THE MASP. (S) AND INJECTION RATE IS INSTALLED. |
| PRODUCTION CASING A C. EQUIPMENT IS INSTAL D. THE EQUIPMENT TO M The well may be place | LLED TO LIMIT THE INJECTION PRESSURE TO MONITOR THE CASING ANNULUS PRESSURE(ed into service per R-22208 | WITH THE NEXT PRIOR CASING. D LESS THAN OR EQUAL TO THE MASP. (S) AND INJECTION RATE IS INSTALLED. |
| PRODUCTION CASING A C. EQUIPMENT IS INSTAL D. THE EQUIPMENT TO N The well may be place | LLED TO LIMIT THE INJECTION PRESSURE TO MONITOR THE CASING ANNULUS PRESSURE(ed into service per R-22208 n above is true and complete to the best of my known is true and complete to the best o | B WITH THE NEXT PRIOR CASING. D LESS THAN OR EQUAL TO THE MASP. (S) AND INJECTION RATE IS INSTALLED. (S) AND INJECTION RATE IS INSTALLED. owledge and belief. ENGINEER DATE 8/25/22 |
| PRODUCTION CASING A C. EQUIPMENT IS INSTAL D. THE EQUIPMENT TO M The well may be place | LLED TO LIMIT THE INJECTION PRESSURE TO MONITOR THE CASING ANNULUS PRESSURE(ed into service per R-22208 n above is true and complete to the best of my known is true and complete to the best o | WITH THE NEXT PRIOR CASING. D LESS THAN OR EQUAL TO THE MASP. (S) AND INJECTION RATE IS INSTALLED. |
| PRODUCTION CASING A C. EQUIPMENT IS INSTAL D. THE EQUIPMENT TO M The well may be place hereby certify that the information SIGNATURE <u>Stephen Janace</u> Type or print name <u>STEPHEN JA</u> For State Use Only | LLED TO LIMIT THE INJECTION PRESSURE TO MONITOR THE CASING ANNULUS PRESSURE(ed into service per R-22208 n above is true and complete to the best of my known is true and complete to the best o | B WITH THE NEXT PRIOR CASING. D LESS THAN OR EQUAL TO THE MASP. (S) AND INJECTION RATE IS INSTALLED. (S) AND INJECTION RATE IS INSTALLED. owledge and belief. ENGINEER DATE 8/25/22 LJANACEK@OXY.COM PHONE: 713-493-1986 |

PATTON MDP1 17 FEDERAL #001H

30-015-44459

CHART FOR MIT RAN ON 7/11/22 FOR CLGC GAS STORAGE

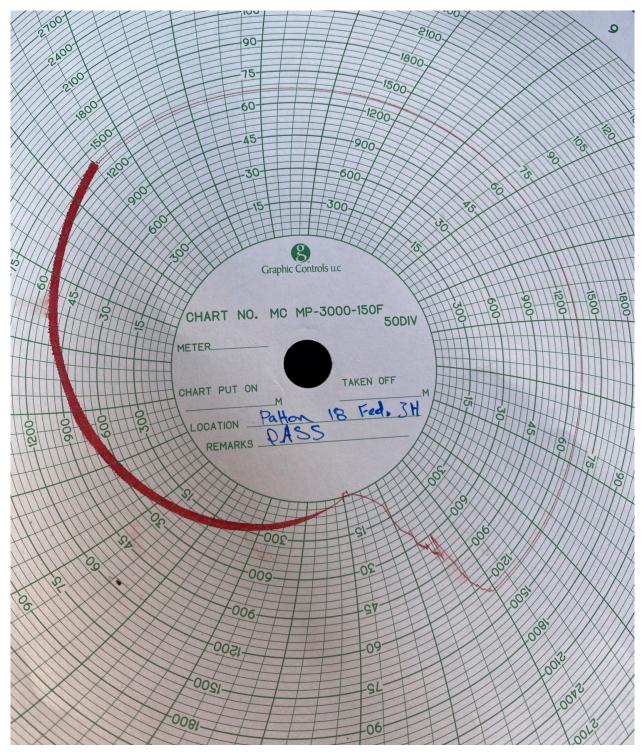


| eccived by OCD: 2/30/2022 10:11:11 AM Office | State of New Mexico | Form C-103 of |
|--|---|---|
| <u>District I</u> – (575) 393-6161 En 1625 N. French Dr., Hobbs, NM 88240 | ergy, Minerals and Natural Resources | Revised July 18, 2013 WELL API NO. |
| <u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210 | IL CONSERVATION DIVISION | 30-015-44333 |
| <u>District III</u> – (505) 334-6178 | 1220 South St. Francis Dr. | 5. Indicate Type of Lease STATE FEE |
| 1000 Rio Brazos Rd., Aztec, NM 87410 District IV (505) 476 3460 | Santa Fe, NM 87505 | 6. State Oil & Gas Lease No. |
| <u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505 | | 0. State On & Gas Lease No. |
| | D REPORTS ON WELLS | 7. Lease Name or Unit Agreement Name |
| (DO NOT USE THIS FORM FOR PROPOSALS TO I DIFFERENT RESERVOIR. USE "APPLICATION FOR PROPOSALS.) | | PATTON MDP1 18 FEDERAL |
| 1. Type of Well: Oil Well \checkmark Gas Well | ll 🗌 Other | 8. Well Number 003H |
| 2. Name of Operator OXY USA INC. | | 9. OGRID Number 16696 |
| 3. Address of Operator | | 10. Pool name or Wildcat |
| PO BOX 4294, HOUSTON, TX 77 | 210 | COTTON DRAW; BONE SPRING |
| 4. Well Location | | |
| Unit Letter <u>C</u> : <u>170</u> | feet from the NORTHline and <u>8</u> | feet from the WEST line |
| Section 18 | Township 24S Range 31E | NMPM County EDDY |
| 11. Ele 3534' G | evation (<i>Show whether DR, RKB, RT, GR, e</i> SL | etc.) |
| 12 Check Appropr | iate Box to Indicate Nature of Notic | e Peport or Other Data |
| 12. Check Appropr | Tate Box to increate Mature of Motic | e, Report of Other Data |
| NOTICE OF INTENTI | ON TO: SL | JBSEQUENT REPORT OF: |
| | AND ABANDON | |
| — | | |
| | PLE COMPL CASING/CEME | ENT JOB |
| | | |
| CLOSED-LOOP SYSTEM CLGO | C STORAGE | |
| | | and give pertinent dates, including estimated date |
| | E RULE 19.15.7.14 NMAC. For Multiple (| |
| proposed completion or recompletio | | |
| PER ORDER R-22208: | | |
| | | |
| B. A CBL IS ON RECORD WITH THE PRODUCTION CASING AND THE T C. EQUIPMENT IS INSTALLED TO L | S PENDING APPROVAL WITH ACTION ID E OCD DEMONSTRATING PLACEMENT C IE-IN OF THE PRODUCTION CASING WIT IMIT THE INJECTION PRESSURE TO LE THE CASING ANNULUS PRESSURE(S) A | OF CEMENT AND CEMENT BOND OF THE I'H THE NEXT PRIOR CASING. SS THAN OR EQUAL TO THE MASP. |
| The Well may be put into ser | vice per R-22208 | |
| | | |
| | | |
| | | |
| | | |
| | | |
| I hereby certify that the information above is | true and complete to the best of my knowle | edge and belief. |
| I hereby certify that the information above is | | |
| I hereby certify that the information above is SIGNATURE <u>Stephen Janacek</u> | TITLE REGULATORY ENG | INEERDATE_8/25/22 |
| I hereby certify that the information above is | TITLE REGULATORY ENG | |

PATTON MDP1 18 FEDERAL #003H

30-015-44333

CHART FOR MIT RAN ON 6/16/22 FOR CLGC GAS STORAGE



| Given by OCP: 2/30/2022 16 Office | | State of New | | Form C=103 |
|--|---|--|--|--|
| <u>District I</u> – (575) 393-6161 | | rgy, Minerals and N | latural Resources | Revised July 18, 2013 WELL API NO. |
| 1625 N. French Dr., Hobbs, NM 882 District II – (575) 748-1283 | | CONCERNMENT | | 30-015-44273 |
| 811 S. First St., Artesia, NM 88210 | Oll | L CONSERVATI | | 5. Indicate Type of Lease |
| <u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87 | 110 | 1220 South St. Francis Dr. | | STATE FEE |
| <u>District IV</u> – (505) 476-3460 | +10 | Santa Fe, NM 87505 | | 6. State Oil & Gas Lease No. |
| 1220 S. St. Francis Dr., Santa Fe, NI | Л | | | |
| 87505 SUNDRY | NOTICES AND | REPORTS ON WE | | 7. Lease Name or Unit Agreement Name |
| (DO NOT USE THIS FORM FOR H DIFFERENT RESERVOIR. USE " | ROPOSALS TO DE | RILL OR TO DEEPEN OF | R PLUG BACK TO A | PATTON MDP1 18 FEDERAL |
| PROPOSALS.) | | C Other | | 8. Well Number 007H |
| Type of Well: Oil Well Name of Operator | Gas Well | U Other | | 9. OGRID Number |
| DXY USA INC. | | | | 16696 |
| 3. Address of Operator | | | | 10. Pool name or Wildcat |
| PO BOX 4294, HOUS | ON TX 772 | 210 | | COTTON DRAW; BONE SPRING |
| 4. Well Location | | | | |
| Unit Letter A | : 150 | feet from the NOR | TH line and 255 | 5feet from the EASTline |
| Section 18 | | Fownship 24S | Range 31E | NMPM County EDDY |
| | | | DR, RKB, RT, GR, etc. | 5 |
| | 3524' GL | | ,,,,,,, | , |
| NOTICE C PERFORM REMEDIAL WOR FEMPORARILY ABANDON PULL OR ALTER CASING | F INTENTIC K PLUG A CHANG | | | ILLING OPNS. P AND A |
| NOTICE C PERFORM REMEDIAL WOR TEMPORARILY ABANDON PULL OR ALTER CASING DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM <u>OTHER:</u> 13. Describe proposed or | F INTENTIC K PLUG A CHANG MULTIP CLGC completed opera | DN TO: ND ABANDON E PLANS LE COMPL STORAGE ations. (Clearly state | SUB REMEDIAL WOR COMMENCE DR CASING/CEMEN all pertinent details, and | BSEQUENT REPORT OF: ALTERING CASING ILLING OPNS. P AND A T JOB d give pertinent dates, including estimated date |
| NOTICE C PERFORM REMEDIAL WOR TEMPORARILY ABANDON PULL OR ALTER CASING DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM OTHER: 13. Describe proposed or of starting any propos proposed completion | F INTENTIC K PLUG A CHANG MULTIP CLGC completed opera ed work). SEE or recompletion. | DN TO: ND ABANDON E PLANS LE COMPL STORAGE ations. (Clearly state RULE 19.15.7.14 NM | SUB REMEDIAL WOR COMMENCE DR CASING/CEMEN all pertinent details, and | SEQUENT REPORT OF: Altering Casing ILLING OPNS. P AND A T JOB |
| NOTICE C PERFORM REMEDIAL WOR TEMPORARILY ABANDON PULL OR ALTER CASING DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM OTHER: 13. Describe proposed or of starting any propose | F INTENTIC K PLUG A CHANG MULTIP CLGC completed opera ed work). SEE or recompletion. | DN TO: ND ABANDON E PLANS LE COMPL STORAGE ations. (Clearly state RULE 19.15.7.14 NM | SUB REMEDIAL WOR COMMENCE DR CASING/CEMEN all pertinent details, and | BSEQUENT REPORT OF: ALTERING CASING ILLING OPNS. P AND A T JOB d give pertinent dates, including estimated date |
| NOTICE C PERFORM REMEDIAL WOR TEMPORARILY ABANDON PULL OR ALTER CASING DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM OTHER: 13. Describe proposed or of starting any propos proposed completion PER ORDER R-222 A. MIT WAS RAN C B. A CBL IS ON RE PRODUCTION CAS C. EQUIPMENT IS | F INTENTIC K PLUG A CHANG CHANG CLGC Completed opera ed work). SEE or recompletion. D8: N 6/20/22 AND I CORD WITH TH SING AND THE TO | DN TO: ND ABANDON E PLANS LE COMPL STORAGE Ations. (Clearly state RULE 19.15.7.14 NM STORAGE RULE 19.15.7.14 NM CLE OCD DEMONSTRATION OF THE PRODUCT OF THE | SUB REMEDIAL WOR COMMENCE DRI CASING/CEMEN all pertinent details, and AC. For Multiple Con VAL WITH ACTION ID ATING PLACEMENT O DUCTION CASING WIT | BSEQUENT REPORT OF: ALTERING CASING ILLING OPNS. P AND A T JOB d give pertinent dates, including estimated date |
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| Type or print name | STEPHEN . | JANA | CEK | E-mail address: | STEPHEN_JANACEK@OXY.CO | M PHONE: | 713-493-1986 |
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| APPROVED BY: Dean | R | Molure | _ _{TITLE} Petroleum Engineer | _{DATE} 09/30/2022 |
|----------------------------------|---|--------|---------------------------------------|----------------------------|
| Conditions of Approval (if any): | | | | |

PATTON MDP1 18 FEDERAL #007H

30-015-44273

CHART FOR MIT RAN ON 6/20/22 FOR CLGC GAS STORAGE

