

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. 30-015-43758
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name CEDAR CANYON 22 FEDERAL COM
8. Well Number 005H
9. OGRID Number 16696
10. Pool name or Wildcat CORAL DRAW; BONE SPRING

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 ☐
2. Name of Operator
OXY USA INC
3. Address of Operator
PO BOX 4294 HOUSTON, TX 77210
4. Well Location
Unit Letter ___ M ___ 1120 ___ feet from the South line and 207 feet from the West line
Section 22 Township 24S Range 29E NMPM County Eddy

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
2940' GR

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 ☐
CLOSED-LOOP SYSTEM ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

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

PLC-483
OTHER: Removed from Dedicated Separator ☒

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.

As per Order R-14299, Cedar Canyon 22 Federal Com #005H has transitioned into Range 1 of decline and has been removed from dedicated separation. It is now routed to a shared separator at the Cedar Canyon 21 Tank Battery (PLC-483).

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 Robert K Wilson TITLE REGULATORY ENGINEER DATE 05/17/2018

Type or print name ROBERT K WILSON E-mail address: ROBERT_WILSON@OXY.COM PHONE: 713-985-6991

For State Use Only

APPROVED BY: Michael M. Yell TITLE Emergency Response DATE 5-23-2018
Conditions of Approval (if any):

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Office
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State of New Mexico
Energy, Minerals and Natural Resources

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

Form C-103
Revised July 18, 2013

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.)		WELL API NO. 30-015-44190
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator OXY USA INC		6. State Oil & Gas Lease No.
3. Address of Operator PO BOX 4294 HOUSTON, TX 77210		7. Lease Name or Unit Agreement Name CEDAR CANYON 21 FEDERAL COM
4. Well Location Unit Letter <u>E</u> : <u>1764</u> feet from the North line and <u>141</u> feet from the West line Section <u>21</u> Township <u>24S</u> Range <u>29E</u> NMPM County <u>Eddy</u>		8. Well Number 022H
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 2930' GR		9. OGRID Number 16696
		10. Pool name or Wildcat CORAL DRAW; BONE SPRING

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 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"/>		<i>PLC-483</i>	
CLOSED-LOOP SYSTEM <input type="checkbox"/>		OTHER: Removed from Dedicated Separator <input checked="" 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.

As per Order R-14299, Cedar Canyon 21 Federal Com #022H has transitioned into Range 1 of decline and has been removed from dedicated separation. It is now routed to a shared separator at the Cedar Canyon 21 Tank Battery (PLC 483).

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 Robert K Wilson TITLE REGULATORY ENGINEER DATE 05/17/2018

Type or print name ROBERT K WILSON E-mail address: ROBERT_WILSON@OXY.COM PHONE: 713-985-6991

For State Use Only

APPROVED BY: Andrew McCall TITLE Engineering Bureau DATE 5-23-2018
Conditions of Approval (if any):

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Energy, Minerals and Natural Resources

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

Form C-103
Revised July 18, 2013

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.)		WELL API NO. 30-015-44191
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator OXY USA INC		6. State Oil & Gas Lease No.
3. Address of Operator PO BOX 4294 HOUSTON, TX 77210		7. Lease Name or Unit Agreement Name CEDAR CANYON 21 FEDERAL COM
4. Well Location Unit Letter <u>E</u> : 1824 feet from the North line and 141 feet from the West line Section 21 Township 24S Range 29E NMPM County Eddy		8. Well Number 023H
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 2931' GR		9. OGRID Number 16696
		10. Pool name or Wildcat CORAL DRAW; BONE SPRING

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 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"/>		<i>PLC-483</i>	
CLOSED-LOOP SYSTEM <input type="checkbox"/>		OTHER: Removed from Dedicated Separator <input checked="" 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.

As per Order R-14299, Cedar Canyon 21 Federal Com #023H has transitioned into Range 1 of decline and has been removed from dedicated separation. It is now routed to a shared separator at the Cedar Canyon 21 Tank Battery (PLC 483).

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 Robert K Wilson TITLE REGULATORY ENGINEER DATE 05/17/2018

Type or print name ROBERT K WILSON E-mail address: ROBERT_WILSON@OXY.COM PHONE: 713-985-6991

For State Use Only

APPROVED BY: Michael M. Smith TITLE Engineering Bureau DATE 5-23-2018
Conditions of Approval (if any):

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Energy, Minerals and Natural Resources

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

WELL API NO. 30-015-44181
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name CEDAR CANYON 21 FEDERAL COM
8. Well Number 021H
9. OGRID Number 16696
10. Pool name or Wildcat CORAL DRAW; BONE SPRING

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 PO BOX 4294 HOUSTON, TX 77210	
4. Well Location Unit Letter <u>A</u> : <u>369</u> feet from the North line and <u>368</u> feet from the East line Section <u>21</u> Township <u>24S</u> Range <u>29E</u> NMPM County <u>Eddy</u>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 2928' 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 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: Removed from Dedicated Separator <input checked="" 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.

As per Order R-14299, Cedar Canyon 21 Federal Com #021H has transitioned into Range 1 of decline and has been removed from dedicated separation. It is now routed to a shared separator at the Cedar Canyon 21 Tank Battery (PLC 483).

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 Robert K Wilson TITLE REGULATORY ENGINEER DATE 05/17/2018

Type or print name ROBERT K WILSON E-mail address: ROBERT_WILSON@OXY.COM PHONE: 713-985-6991

For State Use Only

APPROVED BY: Michael M. Smith TITLE Engineering Manager DATE 5-23-2018
Conditions of Approval (if any):

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Santa Fe, NM 87505

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.)		WELL API NO. 30-015-44176
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator OXY USA INC		6. State Oil & Gas Lease No.
3. Address of Operator PO BOX 4294 HOUSTON, TX 77210		7. Lease Name or Unit Agreement Name CEDAR CANYON 21 22 FEDERAL COM
4. Well Location Unit Letter <u>E</u> : 1794 feet from the North line and 141 feet from the West line Section 21 Township 24S Range 29E NMPM County Eddy		8. Well Number 032H
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 2931' GR		9. OGRID Number 16696
		10. Pool name or Wildcat PURPLE SAGE; WOLFCAMP

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 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: Removed from Dedicated Separator <input checked="" type="checkbox"/>	

PLC-483

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.

As per Order R-14299, Cedar Canyon 21 22 Federal Com #032H has transitioned into Range 1 of decline and has been removed from dedicated separation. It is now routed to a shared separator at the Cedar Canyon 21 Tank Battery (PLC 483).

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 *Robert K Wilson* TITLE REGULATORY ENGINEER DATE 05/17/2018

Type or print name ROBERT K WILSON E-mail address: ROBERT_WILSON@OXY.COM PHONE: 713-985-6991

For State Use Only

APPROVED BY: *Michael M. Smith* TITLE Engineering Bureau DATE 5-23-2018
Conditions of Approval (if any):

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1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-015-44182
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name CEDAR CANYON 21 FEDERAL COM
8. Well Number 031H
9. OGRID Number 16696
10. Pool name or Wildcat PURPLE SAGE, WOLFCAMP

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 PO BOX 4294 HOUSTON, TX 77210	
4. Well Location Unit Letter <u>A</u> : <u>339</u> feet from the North line and 368 feet from the East line Section <u>21</u> Township <u>24S</u> Range <u>29E</u> NMPM County <u>Eddy</u>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 2928' 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 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: <u>PLC-483</u> Removed from Dedicated Separator <input checked="" 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.

As per Order R-14299, Cedar Canyon 21 Federal Com #031H has transitioned into Range 1 of decline and has been removed from dedicated separation. It is now routed to a shared separator at the Cedar Canyon 21 Tank Battery (PLC 483).

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 Robert K Wilson TITLE REGULATORY ENGINEER DATE 05/17/2018

Type or print name ROBERT K WILSON E-mail address: ROBERT_WILSON@OXY.COM PHONE: 713-985-6991

For State Use Only

APPROVED BY Michael M. Smith TITLE Engineering Director DATE 5-23-2018
Conditions of Approval (if any):