61.210. 7.4					
Submit 1 Copy To Appropriate District 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 Resources	Revised July 18, 2013 WELL API NO.			
<u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION	30-015-44528			
<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 <u>District IV</u> – (505) 476-3460	Santa Fe, NM 87505	6. State Oil & Gas Lease No.			
1220 S. St. Francis Dr., Santa Fe, NM 87505					
	TICES 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 ICATION FOR PERMIT" (FORM C-101) FOR SUCH	NIMITZ MDP1 12 FEDERAL COM			
PROPOSALS.)  1. Type of Well: Oil Well	Gas Well  Other	8. Well Number 6H			
2. Name of Operator	das weii Ouier	9. OGRID Number			
OXY USA INC		16696			
3. Address of Operator PO BOX 4294 HOUSTON, TX 7	7210	10. Pool name or Wildcat COTTON DRAW;BONE SPRING			
4. Well Location	7210	COTTON DRAW, BONE SPRING			
•	feet from the South line and 778 feet from the East line				
Section 12	Township 24S Range 30E	NMPM County Eddy			
	11. Elevation (Show whether DR, RKB, RT, GR, etc.,				
	3526' GR				
12. Check	Appropriate Box to Indicate Nature of Notice,	Report or Other Data			
		_			
PERFORM REMEDIAL WORK	PLUG AND ABANDON   REMEDIAL WORL	SEQUENT REPORT OF: K □ ALTERING CASING □			
TEMPORARILY ABANDON	CHANGE PLANS COMMENCE DRI	W-12			
PULL OR ALTER CASING    Description:	MULTIPLE COMPL CASING/CEMENT	TJOB			
DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM	PL	L-493-A			
OTHER:	OTHER: Removed	from Dedicated Separator			
13. Describe proposed or comp	pleted operations. (Clearly state all pertinent details, and	d give pertinent dates, including estimated date			
proposed completion or rec	ork). SEE RULE 19.15.7.14 NMAC. For Multiple Concompletion.	npletions: Attach wellbore diagram of			
, ,	•				
As per Order R-14299, Nimitz 1	MDP1 12 Federal Com #6H has transitioned into Range now routed to a shared separator at the Sand Dunes Cent	e 1 of decline and has been removed from			
dedicated separation, it is t	low routed to a shared separator at the Sand Dunes Cent	rai raik Ballery (CTB-640).			
Spud Date:	Rig Release Date:				
	<b>L</b>				
I hereby certify that the information above is true and complete to the best of my knowledge and belief.					
2/11					
SIGNATURE TITLE REGULATORY ENGINEER DATE 12/17/2018					
Type or print name ROBERT K WILSON_ E-mail address: ROBERT_WILSON@OXY.COM PHONE: 713-985-6991					
For State Use Only	20				
APPROVED BY Mulaff	Wille TITLE Engenery 13	DATE 12-17-2018			
Conditions of Approval (if any):	<i>y</i> 3				

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 8/505  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			WELL API NO. 30-015-44529  5. Indicate Type of L STATE  6. State Oil & Gas Le  7. Lease Name or Ur NIMITZ MDP1 12 F  8. Well Number 7H	FEEease No.  nit Agreement Name	
<ul><li>2. Name of Operator OXY USA INC</li><li>3. Address of Operator PO BOX 4294 HOUSTON, TX 7</li></ul>	7210		9. OGRID Number 16696 10. Pool name or Will COTTON DRAW;B0		
4. Well Location Unit LetterP_:_379	feet from the South line and 868 f	eet from the East line			
Section 12	Township 24S	Range 30E	NMPM	County Eddy	
	11. Elevation (Show whether D 3525' GR	OR, RKB, RT, GR, etc.,	)		
	Appropriate Box to Indicate  NTENTION TO:	1	Report or Other Da		
PERFORM REMEDIAL WORK  TEMPORARILY ABANDON PULL OR ALTER CASING DOWNHOLE COMMINGLE	CHANGE PLANS  MULTIPLE COMPL	REMEDIAL WORL COMMENCE DRI CASING/CEMENT	K AL' LLING OPNS. PA	TERING CASING  AND A	
CLOSED-LOOP SYSTEM			DLL-499-A		
of starting any proposed w proposed completion or red As per Order R-14299, Nimitz	pleted operations. (Clearly state al ork). SEE RULE 19.15.7.14 NM/completion.  MDP1 12 Federal Com #7H has transmit to a shared separator at	Il pertinent details, and AC. For Multiple Cor mustiple Cor ansitioned into Range	npletions: Attach wellb	ncluding estimated date pore diagram of een removed from	
Spud Date:	Rig Release I	Date:			
I hereby certify that the information above is true and complete to the best of my knowledge and belief.  SIGNATURE					
Type or print name ROBERT K WILSON_ E-mail address: ROBERT_WILSON@OXY.COM PHONE: 713-985-6991  For State Use Only					
APPROVED BY: Molan / March TITLE Engineery Beren DATE /2-17-2019 Conditions of Approval (if any):					

(DO NOT USE THIS FORM FOR PROPODIFFERENT RESERVOIR. USE "APPLIPROPOSALS.)  1. Type of Well: Oil Well  2. Name of Operator OXY USA INC  3. Address of Operator PO BOX 4294 HOUSTON, TX 77  4. Well Location	CATION FOR PERMIT" (FORM C-101)  Gas Well  Other	N DIVISION ancis Dr. 87505  LS PLUG BACK TO A FOR SUCH	Form C-103 Revised July 18, 2013  WELL API NO. 30-015-44498  5. Indicate Type of Lease STATE FEE  6. State Oil & Gas Lease No.  7. Lease Name or Unit Agreement Name NIMITZ MDP1 13 FEDERAL COM  8. Well Number 2H  9. OGRID Number 16696  10. Pool name or Wildcat COTTON DRAW;BONE SPRING		
Section 12	Township 24S	Range 30E	NMPM County Eddy		
	11. Elevation (Show whether D.				
	3525' GR				
	Appropriate Box to Indicate I	1	•		
PERFORM REMEDIAL WORK  TEMPORARILY ABANDON  PULL OR ALTER CASING  DOWNHOLE COMMINGLE  CLOSED-LOOP SYSTEM	TENTION TO: PLUG AND ABANDON  CHANGE PLANS  MULTIPLE COMPL	REMEDIAL WOR COMMENCE DRI CASING/CEMEN	LLING OPNS. PANDA TJOB D		
OTHER: 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, Nimitz dedicated separation. It is n	MDP1 13 Federal Com #2H has transmow routed to a shared separator at	ansitioned into Range the Sand Dunes Cent	e 1 of decline and has been removed from tral Tank Battery (CTB-840).		
Spud Date:	Rig Release D	Date:			
I hereby certify that the information above is true and complete to the best of my knowledge and belief.					
SIGNATURE TITLE_REGULATORY ENGINEER_DATE_12/17/2018					
Type or print name ROBERT K WILSON_ E-mail address: ROBERT_WILSON@OXY.COM PHONE: 713-985-6991  For State Use Only					
APPROVED BY: Mulled March TITLE Engree B down DATE 12-17-2011 Conditions of Approval (if any):					

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<u>District II</u> – (575) 748-1283	OIL CONSERVATION	I DIVISION	30-015-44525		
811 S. First St., Artesia, NM 88210 District III – (505) 334-6178	1220 South St. Fra		5. Indicate Type of Lease		
1000 Rio Brazos Rd., Aztec, NM 87410			STATE FEE		
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505	Santa Fe, NM 87505		6. State Oil & Gas Lease No.		
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			7. Lease Name or Unit Agreement Name NIMITZ MDP1 13 FEDERAL COM		
PROPOSALS.)  1. Type of Well: Oil Well	Gas Well  Other		8. Well Number 3H		
2. Name of Operator			9. OGRID Number 16696		
OXY USA INC  3. Address of Operator			10. Pool name or Wildcat		
PO BOX 4294 HOUSTON, TX 7	7210		COTTON DRAW;BONE SPRING		
4. Well Location	Frank frank de Carada II. a. a. 1 000 f.				
Section 12	feet from the South line and 808 fee Township 24S I	et from the East line Range 30E	NMPM County Eddy		
Section 12	11. Elevation (Show whether DR	<del></del>			
	3526' GR				
12. Check	Appropriate Box to Indicate N	Vature of Notice,	Report or Other Data		
NOTICE OF IN	NTENTION TO:	SUB	SEQUENT REPORT OF:		
PERFORM REMEDIAL WORK		REMEDIAL WOR			
TEMPORARILY ABANDON		COMMENCE DRI			
PULL OR ALTER CASING		CASING/CEMEN	T JOB L		
DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM			PLC-499-A		
OTHER:			d 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.					
An area Onder D 14000 Nimite	MDD1 12 E-41 C #211 b 4		1 . C J . L'		
	MDP1 13 Federal Com #3H has train now routed to a shared separator at the		e 1 of decline and has been removed from tral Tank Battery (CTB-840).		
•	•		• \		
		<u> </u>			
Spud Date:	Rig Release Da	ate:			
I hereby certify that the information above is true and complete to the best of my knowledge and belief.					
SIGNATURETITLE_REGULATORY ENGINEER_DATE_12/17/2018					
Type or print name ROBERT K WILSON_ E-mail address: ROBERT_WILSON@OXY.COM PHONE: 713-985-6991  For State Use Only					
APPROVED BY Auduf Morece TITLE Engues Block DATE 12-17-2018					
Conditions of Approval (if any):					