State of New Mexico

Form C-101 Permit 34586

Energy, Minerals and Natural Resources

Oil Conservation Division 1220 S. St Francis Dr. Santa Fe, NM 87505

APPLICATION FOR PERMIT TO DRILL, RE-ENTER, DEEPEN, PLUGBACK, OR ADD A ZONE

	Operator Name and Address WTP LIMITED PARTNERSHIP	2. OGRID Number		
	192463 3. API Number			
HO	USTON , TX 772104294	30-025-38018		
4. Property Code	5. Property Name	6. Well No.		
35850	OXY MARSH HAWK STATE	001		

7. Surface Location

3	UL - Lot	Section	Township	Range	Lot Idn	Feet From	N/S Line	Feet From	E/W Line	County
	G	21	16S	32E	G	1550	И	1600	E	LEA

8. Pool Information

Wildcat Morrow 0

Additional Well Information

9. Work Type New Well	33.450-14	ll Type AS			13. Ground Level Elevation 4333
14. Montriple N			16. Formation Morrow	17. Contractor	18. Spud Date 8/10/2006
Depth to Ground 100	water		Distance from nearest fresh water we > 1000	Distance to nearest surface water > 1000	
Pit: Liner: Synthetic D Closed Loop System	-	mils thick		rilling Method: resh Water 🔀 Brine 🗀 1	Diesel/Oil-based Gas/Air

19. Proposed Casing and Cement Program

Туре	Hole Size	Casing Type	Casing Weight/ft	Setting Depth	Sacks of Cement	Estimated TOC
Surf	17.5	13.375	48	600	600	0
Int1	12.25	9.675	36	4500	1300	0
Prod	8.75	5.5	17	12700	1000	8000

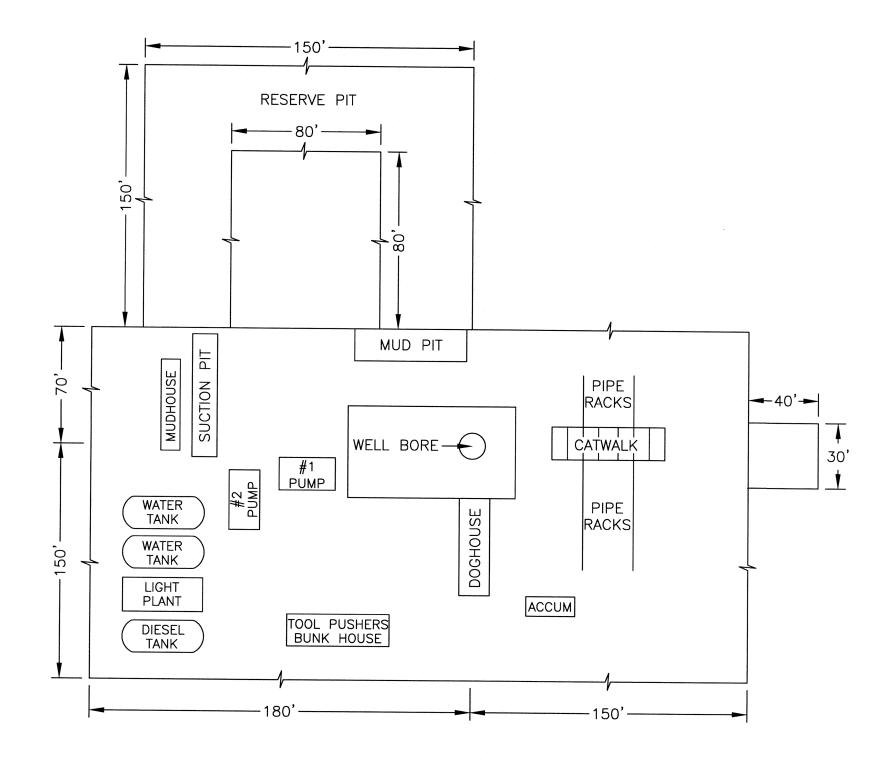
Casing/Cement Program: Additional Comments

Additional information will be provided.

Proposed Blowout Prevention Program

Туре	Working Pressure	Test Pressure	Manufacturer
Annular	3000	3000	Divertor Only
Annular	5000	5000	

I hereby certify that the information give of my knowledge and belief. I further certify that the drilling pit v	n above is true and complete to the best will be constructed according to	OIL CONSERVATION DIVISION				
NMOCD guiddines 🔀, a general per OCD-approved plan 🗀		Approved By: Paul Kautz				
Printed Name: Electronically file	d by Elizabeth Bush-Ivie	Title: Geologist				
Title: Regulatory Team Leader		Approved Date: 7/21/2006	Expiration Date: 7/21/2007			
Email Address: Elizabeth_Bush@	Joxy.com	estration of the second of the	\$1.5 HZ			
Date: 7/20/2006	Phone: 713-366-5303	Conditions of Approval Attac	hed			



District I

1625 N. French Dr., Hobbs, NM 88240 Phone:(505) 393-6161 Fax:(505) 393-0720

District II

1301 W. Grand Ave., Artesia, NM 88210 Phone:(505) 748-1283 Fax:(505) 748-9720

District III

1000 Rio Brazos Rd., Aztec, NM 87410 Phone:(505) 334-6178 Fax:(505) 334-6170

District IV

1220 S. St Francis Dr., Santa Fe, NM 87505 Phone:(505) 476-3470 Fax:(505) 476-3462

State of New Mexico

Energy, Minerals and Natural Resources Oil Conservation Division

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

WELL LOCATION AND ACREAGE DEDICATION PLAT

070						
1. API Number	2. Pool Code	2. Pool Code 3. Pool Name				
30-025-38018	2000/2000/2002/20000/20000/2000/20000/2000/20000/2000/2000/2000/200	Wild	cat Morrow			
4. Property Code	5. Property	5. Property Name				
35850	OXY MARSH H	OXY MARSH HAWK STATE				
7. OGRID No.	8. Operato	8. Operator Name				
192463	OXY USA WTP LIMIT	'ED PARTNERSHIP	4333			

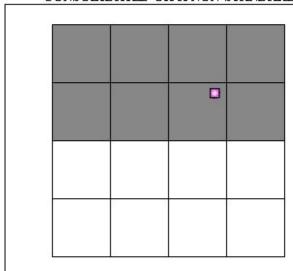
10. Surface Location

3	UL - Lot	Section	Township	Range	Lot Idn	Feet From	N/S Line	Feet From	E/W Line	County
	G	21	16S	32E		1550	И	1600	E	LEA

11. Bottom Hole Location If Different From Surface

III DOVOM INC DOCUMENT DESCRIPTION SALACE												
UL - Lot	Section	To	wnship	Range	Lot	Idn	Feet From	N/S L	ine	Feet From	E/W Line	County
1077.07(3)	cated Acres		13. J	oint or Infill		14	. Consolidation (Code			15. Order No.	

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION



OPERATOR CERTIFICATION

Form C-102

Permit 34586

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

E-Signed By: Elizabeth Bush-Ivie Title: Regulatory Team Leader

Date: 7/20/2006

SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.

Surveyed By: Gary Eidson Date of Survey: 11/1/2005 Certificate Number: 12641

Permit Comments

Operator: OXY USA WTP LIMITED PARTNERSHIP , 192463 Well: OXY MARSH HAWK STATE #001

API: 30-025-38018

Cre	ated By	Comment	Comment Date
DAVII	DSTEWART	Additional casing/cementing/BOP information will be sent along with the H2S Plan.	7/20/2006

Permit Conditions of Approval Operator: OXY USA WTP LIMITED PARTNERSHIP , 192463 Well: OXY MARSH HAWK STATE #001

API: 30-025-38018

OCD Reviewer	Condition
IDKAUTZ	Pit construction and closure must satisfy all requirements of your approved plan, O.C.D. Rule 19.15.2.50, and the Pit and Below-Grade Tank Guidelines
pkautz	prior to any pit construction notify Gary Wink at 505-393-6161 ext 114