

**District I**  
1625 N. French Dr., Hobbs, NM 88240  
Phone:(575) 393-6161 Fax:(575) 393-0720  
**District II**  
811 S. First St., Artesia, NM 88210  
Phone:(575) 748-1283 Fax:(575) 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**

Form C-103  
August 1, 2011

Permit 169878

<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 NUMBER 30-015-40723
1. Type of Well: O		5. Indicate Type of Lease S
2. Name of Operator OXY USA WTP LIMITED PARTNERSHIP		6. State Oil & Gas Lease No.
3. Address of Operator PO Box 4294, Houston, TX 77210		7. Lease Name or Unit Agreement Name PIGLET 21 STATE
4. Well Location Unit Letter <u>M</u> : <u>980</u> feet from the <u>S</u> line and <u>750</u> feet from the <u>W</u> line Section <u>21</u> Township <u>17S</u> Range <u>28E</u> NMPM <u>Eddy</u> County		8. Well Number 016
11. Elevation (Show whether DR, KB, BT, GR, etc.) 3600 GR		9. OGRID Number 192463
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> Pit Type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____ Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____		10. Pool name or Wildcat

<b>12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data</b>	
<b>NOTICE OF INTENTION TO:</b> PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE OF PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> Other: _____	<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input type="checkbox"/> ALTER CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> Other: <u>Drilling/Cement</u> <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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

PIGLET 21 STATE #16  
 05/11/2013 - SPUD 11" SURFACE HOLE.  
 05/12/2013 - TD SURFACE HOLE @ 430'. RUN 8.625" 24# J55 CASING TO 430'. CEMENT W/ 210 SX 1.34 YLD;  
 CIRCULATED 83 SX TO SURFACE. TOC = 0'.  
 05/13/2013 - PRESSURE TESTED SURFACE CASING @ 2064 PSI - 30 MINUTES - GOOD TEST. BEGAN DRILLING 7.875" PRODUCTION HOLE.  
 05/16/2013 - TD WELL @ 4820'. RAN 5.5" 17# L80 PRODUCTION CASING TO td.  
 05/17/2013 - CEMENTED W/ 830 SX 2.43 YLD; CIRCULATED 110 SX TO SURFACE. TOC = 0'. RELEASED RIG. 5/11/2013  
 Spudded well.

**Casing and Cement Program**

Date	String	Fluid Type	Hole Size	Csg Size	Weight lb/ft	Grade	Est TOC	Dpth Set	Sacks	Yield	Class	1" Dpth	Pres Held	Pres Drop	Open Hole
05/12/13	Surf	FreshWater	11	8.625	24	J55	0	430	210	1.34	C		2064	0	N
05/16/13	Prod	Brine	7.875	5.5	17	L80	0	4820	830	2.43	C				N

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOC guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Electronically Signed \_\_\_\_\_ TITLE \_\_\_\_\_ DATE 7/11/2013  
 Type or print name KAREN M SINARD E-mail address karen\_sinard@oxy.com Telephone No. 713-366-5485

**For State Use Only:**

APPROVED BY: Randy Dade TITLE District Supervisor DATE 7/13/2013 2:20:01 PM