

**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-101  
August 1, 2011  
Permit 267096

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

|                                                                                        |  |                               |
|----------------------------------------------------------------------------------------|--|-------------------------------|
| 1. Operator Name and Address<br>OXY USA INC<br>P.O. Box 4294<br>Houston, TX 77210-4294 |  | 2. OGRID Number<br>16696      |
| 4. Property Code<br>325625                                                             |  | 3. API Number<br>30-025-45928 |
| 5. Property Name<br>AVOGATO 30 31 STATE COM                                            |  | 6. Well No.<br>033H           |

**7. Surface Location**

|          |         |          |       |         |           |          |           |          |        |
|----------|---------|----------|-------|---------|-----------|----------|-----------|----------|--------|
| UL - Lot | Section | Township | Range | Lot Idn | Feet From | N/S Line | Feet From | E/W Line | County |
| C        | 30      | 22S      | 33E   | C       | 240       | N        | 1420      | W        | Lea    |

**8. Proposed Bottom Hole Location**

|          |         |          |       |         |           |          |           |          |        |
|----------|---------|----------|-------|---------|-----------|----------|-----------|----------|--------|
| UL - Lot | Section | Township | Range | Lot Idn | Feet From | N/S Line | Feet From | E/W Line | County |
| N        | 31      | 22S      | 33E   | N       | 20        | S        | 2190      | W        | Lea    |

**9. Pool Information**

|                            |       |
|----------------------------|-------|
| RED TANK;BONE SPRING, EAST | 51687 |
|----------------------------|-------|

**Additional Well Information**

|                           |                             |                                        |                         |                                    |
|---------------------------|-----------------------------|----------------------------------------|-------------------------|------------------------------------|
| 11. Work Type<br>New Well | 12. Well Type<br>OIL        | 13. Cable/Rotary                       | 14. Lease Type<br>State | 15. Ground Level Elevation<br>3701 |
| 16. Multiple<br>N         | 17. Proposed Depth<br>22793 | 18. Formation<br>3rd Bone Spring Sand  | 19. Contractor          | 20. Spud Date<br>9/11/2019         |
| Depth to Ground water     |                             | Distance from nearest fresh water well |                         | Distance to nearest surface water  |

☒ We will be using a closed-loop system in lieu of lined pits

**21. Proposed Casing and Cement Program**

| Type | Hole Size | Casing Size | Casing Weight/ft | Setting Depth | Sacks of Cement | Estimated TOC |
|------|-----------|-------------|------------------|---------------|-----------------|---------------|
| Surf | 17.5      | 13.375      | 54.5             | 1055          | 1113            | 0             |
| Int1 | 12.25     | 7.625       | 26.4             | 5909          | 560             | 0             |
| Int1 | 9.875     | 7.625       | 26.4             | 11452         | 1883            | 0             |
| Prod | 6.75      | 5.5         | 20               | 22792         | 868             | 0             |

**Casing/Cement Program: Additional Comments**

|                                                                                                                                                                                                                                                                                         |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Proposed Mud Program: 0-1055' Water-Based, 1055'-11452' Saturated Brine or Oil-Based Mud, 11452'-TD' Oil-Based Mud. BOP Program: 13-5/8 10M three ram stack with 5M annular preventer, 10M choke manifold. Additional information will be sent along with the H2S and Gas Capture Plan. |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

**22. Proposed Blowout Prevention Program**

| Type       | Working Pressure | Test Pressure | Manufacturer |
|------------|------------------|---------------|--------------|
| Annular    | 5000             | 5000          |              |
| Blind      | 5000             | 5000          |              |
| Double Ram | 5000             | 5000          |              |

|                                                                                                                                                                                                                                                                                                                      |                                                          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| 23. I hereby certify that the information given above is true and complete to the best of my knowledge and belief.<br>I further certify I have complied with 19.15.14.9 (A) NMAC <input checked="" type="checkbox"/> and/or 19.15.14.9 (B) NMAC <input checked="" type="checkbox"/> if applicable.<br><br>Signature: | <b>OIL CONSERVATION DIVISION</b>                         |
| Printed Name: Electronically filed by KELLEY MONTGOMERY                                                                                                                                                                                                                                                              | Approved By: Paul F Kautz                                |
| Title: Manager Regulatory                                                                                                                                                                                                                                                                                            | Title: Geologist                                         |
| Email Address: kelley_montgomery@oxy.com                                                                                                                                                                                                                                                                             | Approved Date: 5/10/2019      Expiration Date: 5/10/2021 |
| Date: 5/8/2019      Phone: 713-366-5716                                                                                                                                                                                                                                                                              | Conditions of Approval Attached                          |

DISTRICT I  
1200 S. 2ND ST., SUITE 200, ALBUQUERQUE, NM 87102  
Phone: (505) 243-2341 Fax: (505) 243-2342

DISTRICT II  
501 E. FIRST ST., ALBUQUERQUE, NM 87102  
Phone: (505) 742-1222 Fax: (505) 742-9722

DISTRICT III  
1000 W. SAMUEL BLVD., ALBUQUERQUE, NM 87102  
Phone: (505) 264-4176 Fax: (505) 264-4176

DISTRICT IV  
1000 W. SAMUEL BLVD., SUITE 200, ALBUQUERQUE, NM 87102  
Phone: (505) 264-4176 Fax: (505) 264-4176

State of New Mexico  
Energy, Minerals & Natural Resources Department  
**OIL CONSERVATION DIVISION**  
1220 SOUTH ST. FRANCIS DR.  
Santa Fe, New Mexico 87505

Form C-106  
Revised August 1, 2011  
Submit one copy to appropriate  
District Office

☐ AMENDED REPORT

**WELL LOCATION AND ACREAGE DEDICATION PLAT**

|                       |                                          |                                    |
|-----------------------|------------------------------------------|------------------------------------|
| API Number<br>30-025- | Pool Code<br>51883                       | Pool Name<br>RED TANK; BONE SPRING |
| Property Code         | Property Name<br>AVOGATO 30_31 STATE COM | Well Number<br>33H                 |
| DEED No.<br>18898     | Operator Name<br>OXY USA                 | Elevation<br>3701.7'               |

**Surface Location**

| UL or lot No. | Section | Township | Range | Lot Ids | Feet from the | North/South line | Feet from the | East/West line | County |
|---------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|--------|
| C             | 30      | 22-S     | 33-E  |         | 240           | NORTH            | 1420          | WEST           | LEA    |

**Bottom Hole Location If Different From Surface**

| UL or lot No. | Section | Township | Range | Lot Ids | Feet from the | North/South line | Feet from the | East/West line | County |
|---------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|--------|
| N             | 3       | 22-S     | 33-E  |         | 20            | SOUTH            | 2190          | WEST           | LEA    |

| Dedicated Acres | Joint or Infill | Consolidation Code | Order No. |
|-----------------|-----------------|--------------------|-----------|
| 813.28          |                 |                    |           |

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

**SURFACE LOCATION**  
Y=498874.6 N  
X=783057.1 E  
LAT.=32.38943° N  
LONG.=103.61519° W

GRID AZ. = 72°49'40"  
HORZ. DIST. = 782.8'

LOT 1  
38.88 Ac

LOT 2  
38.87 Ac

LOT 3  
38.88 Ac

LOT 4  
38.67 Ac

LOT 1  
38.67 Ac

LOT 2  
38.71 Ac

LOT 3  
38.66 Ac

LOT 4  
38.63 Ac

LOT 1  
38.66 Ac

LOT 2  
38.63 Ac

LOT 3  
38.66 Ac

LOT 4  
38.60 Ac

**PROPOSED BOTTOM HOLE LOCATION**  
Y=498580.8 N  
X=783901.1 E  
LAT.=32.34712° N  
LONG.=103.61288° W

**50' FUL & 2100' FUL**  
Y=498083.7 N  
X=783020.8 E  
LAT.=32.38985° N  
LONG.=103.61270° W

**100' FUL & 2100' FUL**  
Y=498078.7 N  
X=783025.1 E  
LAT.=32.38981° N  
LONG.=103.61270° W

| POINT | COORDINATES                  |
|-------|------------------------------|
| 1     | Y=498107.5 N<br>X=783026.4 E |
| 2     | Y=498128.8 N<br>X=783078.4 E |
| 3     | Y=498110.3 N<br>X=783088.5 E |
| 4     | Y=498064.8 N<br>X=783171.3 E |
| 5     | Y=498082.8 N<br>X=783088.7 E |
| 6     | Y=498084.3 N<br>X=783088.2 E |
| 7     | Y=498120.5 N<br>X=783186.7 E |

**OPERATOR CERTIFICATION**

I hereby certify that the information herein is true and complete to the best of my knowledge and belief, and that this representation shall serve as a written defense or release of liability in the event of any claim or suit arising out of this well location or in a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

Signature: Leslie Reeves Date: 05/08/19

Printed Name: LESLIE REEVES

E-mail Address: LESLIE\_REEVES@OXY.COM

**SURVEYOR CERTIFICATION**

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

MARCH 12, 2019

Date of Survey

Signature & Seal of Professional Surveyor

CHAD L. HARCROW

NEW MEXICO

17777

LICENSED PROFESSIONAL SURVEYOR

4/3/19

Certificate No. CHAD HARCROW 17777

W.O. # 18-481 DRAWN BY: AH

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 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 APD Comments

Permit 267096

PERMIT COMMENTS

|                                                                                              |  |                                        |
|----------------------------------------------------------------------------------------------|--|----------------------------------------|
| Operator Name and Address:<br>OXY USA INC [16696]<br>P.O. Box 4294<br>Houston, TX 77210-4294 |  | API Number:<br>30-025-45928            |
|                                                                                              |  | Well:<br>AVOGATO 30 31 STATE COM #033H |

| Created By   | Comment                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Comment Date |
|--------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|
| iesliereeves | First Take Point/Top Perforated Interval: 100' FNL 2190' FWL NENW 30-T22S-R33E LEA - Lat. 32.369813 Long. -103.612701 (NAD83). Last Take Point/Bottom Perforated Interval: 100' FSL 2190' FWL SESW 31-T22S-R33E LEA - Lat. 32.341341 Long. -103.612686 (NAD83). A closed loop system will be utilized consisting of above ground steel tanks and haul-off bins. Disposal of liquids, drilling fluids and cutting will be disposed of at an approved facility. | 5/8/2019     |

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

Form APD Conditions

Permit 267096

**PERMIT CONDITIONS OF APPROVAL**

|                                                                                              |                                        |
|----------------------------------------------------------------------------------------------|----------------------------------------|
| Operator Name and Address:<br>OXY USA INC [16696]<br>P.O. Box 4294<br>Houston, TX 77210-4294 | API Number:<br>30-025-45928            |
|                                                                                              | Well:<br>AVOGATO 30 31 STATE COM #033H |

| OCD<br>Reviewer | Condition                                                                                                                                                                                                                                                                                                                                                         |
|-----------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| pkautz          | Will require a directional survey with the C-104                                                                                                                                                                                                                                                                                                                  |
| pkautz          | 1) SURFACE & INTERMEDIATE CASING - Cement must circulate to surface -- 2) PRODUCTION CASING - Cement must tie back into intermediate casing --                                                                                                                                                                                                                    |
| pkautz          | If cement does not circulate to surface, must run temperature survey or other log to determine top of cement                                                                                                                                                                                                                                                      |
| pkautz          | Surface casing must be set 25' below top of Rustler Anhydrite in order to seal off protectable water                                                                                                                                                                                                                                                              |
| pkautz          | 1)- The Operator is to notify NMOCD by sundry (Form C-103) within ten (10) days of the well being spud 2)- Drilling Sundries Form C-103 (Casing and Cement test are to be submitted within 10 days 3)- Completion Reports & Logs are to be submitted within 45 days 4)- Deviation / Directional Drill Survey are to be filed with or prior to C-104               |
| pkautz          | It is the operator's responsibility to monitor cancellation dates of approved APDs. APD's are good for 2 years and may be extended for one year. Only one 1 year extension will be granted if submitted by C-103 before expiration date. After expiration date or after a 1 year extension must submit new APD.                                                   |
| pkautz          | Stage Tool 1) Must notify OCD Hobbs Office prior to running Stage Tool at 5753703186 2) If using Stage Tool on Surface casing, Stage Tool must be set greater than 350' from surface and a minimum of 200 feet above surface shoe. 3) When using a Stage Tool on Intermediate or Production Casing Stage must be a minimum of 50 feet below previous casing shoe. |