

Submit a 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. 30-025-45956
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. VB03740000
7. Lease Name or Unit Agreement Name AVOGATO 30 31 STATE COM
8. Well Number 11H
9. OGRID Number 16696
10. Pool name or Wildcat RED TANK; BONE SPRING, EAST

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>D</u> : <u>160</u> feet from the <u>NORTH</u> line and <u>855</u> feet from the <u>WEST</u> line Section <u>30</u> Township <u>22S</u> Range <u>33E</u> NMPM County <u>LEA</u>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3706' GL	

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:	CLGC STORAGE <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.  
PER ORDER R-22101-

- A. RESULTS OF THE RECENT MIT ARE ATTACHED.  
B. A CBL IS ON RECORD WITH THE OCD DEMONSTRATING PLACEMENT OF CEMENT AND CEMENT BOND OF THE PRODUCTION CASING AND THE TIE-IN OF THE PRODUCTION CASING WITH THE NEXT PRIOR CASING.  
C. EQUIPMENT IS INSTALLED TO LIMIT THE INJECTION PRESSURE TO LESS THAN OR EQUAL TO THE MASP.  
D. THE EQUIPMENT TO MONITOR THE CASING ANNULUS PRESSURE(S) AND INJECTION RATE IS INSTALLED.

OXY WILL PLACE THIS CLGC WELL INTO SERVICE IN 48 HOURS AND IT WILL BE READY FOR INJECTION.

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 Stephen Janacek TITLE REGULATORY ENGINEER DATE 5/5/22

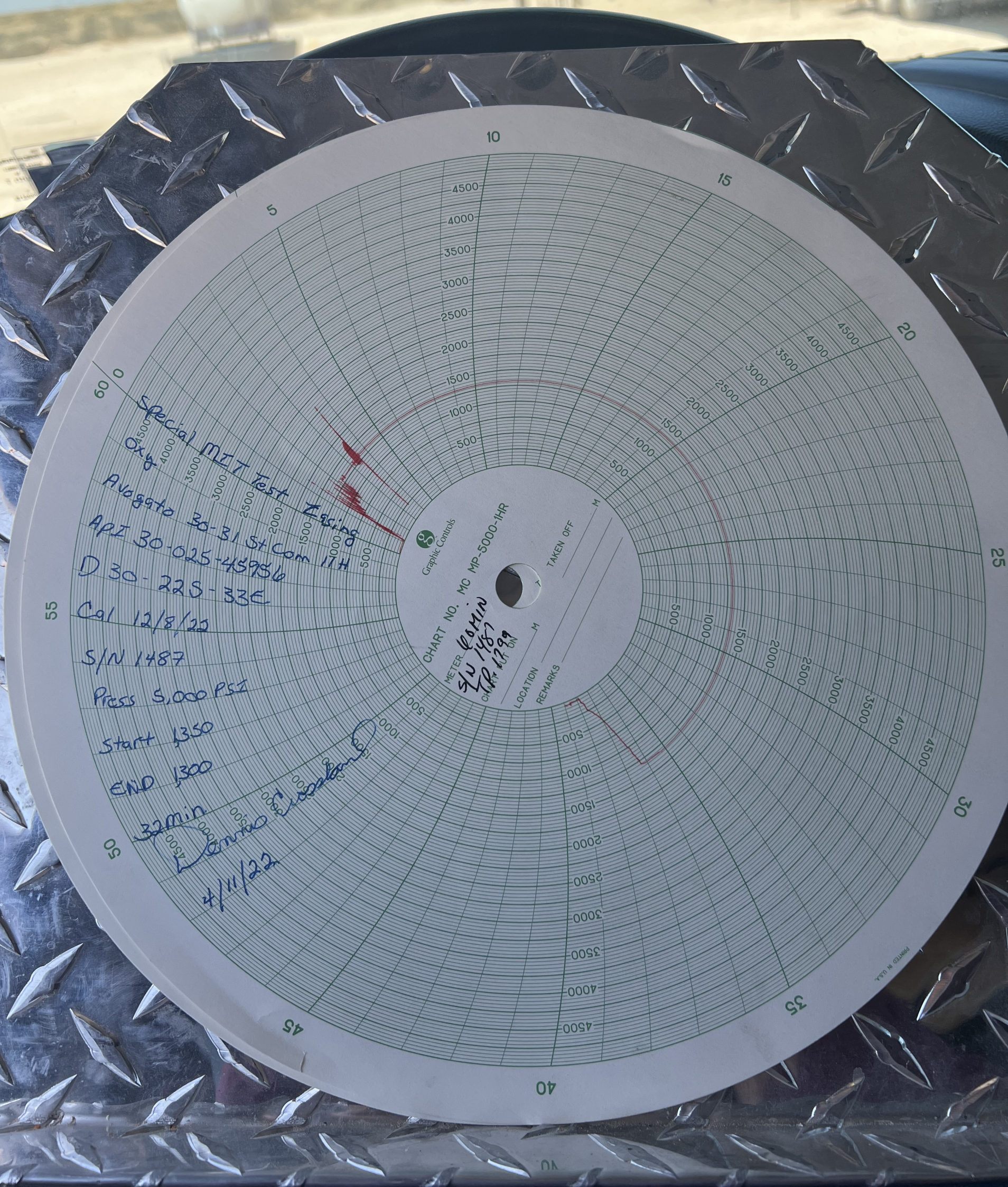
Type or print name STEPHEN JANACEK E-mail address: STEPHEN\_JANACEK@OXY.COM PHONE: 713-493-1986

**For State Use Only**

APPROVED BY: Dean R McClure TITLE Petroleum Engineer DATE 05/06/2022

Conditions of Approval (if any):







District 1  
1625 N French Dr., Hobbs, NM 88240  
Phone: (575) 393-6161 Fax: (575) 393-0720

State of New Mexico  
Energy, Minerals and Natural Resources Department  
Oil Conservation Division Hobbs District Office

## BRADENHEAD TEST REPORT

Operator Name <b>Oxy USA</b>		API Number <b>30-025-45956</b>	
Property Name <b>AVOGATO 30 31 State Com</b>		Well No. <b>011H</b>	

1. Surface Location						E/W Line	County
UL - Lot	Section	Township	Range	Feet from	N/S Line	Feet From	
<b>D</b>	<b>30</b>	<b>22S</b>	<b>33E</b>	<b>160</b>	<b>N</b>	<b>885</b>	<b>W Lea</b>

Well Status				PRODUCER		DATE
TA'D WELL	SHUT-IN	INJ	INJECTOR	SWD	GAS	
<b>YES</b>	<b>NO</b>	<b>YES</b>	<b>NO</b>	<b>OIL</b>	<b>GAS</b>	<b>4-8-22</b>

4/11/22

## OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Casing	(E)Tubing
Pressure	<b>0</b>	<b>0</b>		<b>0</b>	<b>0</b>
Flow Characteristics					
Puff	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>CO2</b>
Steady Flow	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>WTR</b>
Surges	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>GAS</b>
Down to nothing	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	Type of Fluid
Gas or Oil	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	Injected for
Water	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	Waterflood if
					applies

Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

Special MIT Test  
Jaguar Hydrostatic  
sent# 1487  
CAL 12/8/21

Signature: <b>Dennis Crossland</b>		OIL CONSERVATION DIVISION	
Printed name: <b>DENNIS CROSSLAND</b>		Entered into RBDMS	
Title: <b>WOCS</b>		Re-test	
E-mail Address:			
Date:	Phone: <b>580-290-0600</b>		
Witness:			

INSTRUCTIONS ON BACK OF THIS FORM



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**State of New Mexico**  
**Energy, Minerals and Natural Resources**  
**Oil Conservation Division**  
**1220 S. St Francis Dr.**  
**Santa Fe, NM 87505**

CONDITIONS

Action 104654

CONDITIONS

Operator: OXY USA INC P.O. Box 4294 Houston, TX 772104294	OGRID: 16696
	Action Number: 104654
	Action Type: [C-103] NOI General Sundry (C-103X)

CONDITIONS

Created By	Condition	Condition Date
dmcclure	None	5/6/2022