

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  
87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
Revised August 1, 2011

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

WELL API NO. 30-059-20204
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. L - 6263-2
7. Lease Name or Unit Agreement Name BRAVO DOME CARBON DIOXIDE GAS UNIT
8. Well Number 321 A (SWD)
9. OGRID Number 16696
10. Pool name or Wildcat GLORIETTA

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 type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other SWD	
2. Name of Operator OXY USA INC	
3. Address of Operator P. O. Box 303, Amistad Nm 88410	
4. Well Location Unit Letter <u>A</u> <u>956</u> feet from the <u>NORTH</u> line and <u>956</u> feet from the <u>EAST</u> line Section <u>32</u> Township <u>19 N</u> Range <u>34 E</u> NM PM UNION County	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <u>4912'</u>	

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐  
DOWNHOLE COMMINGLE ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐

OTHER: MECHANICAL INTEGRITY TEST  
☒

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.

RUN MECHANICAL INTEGRITY TEST, SEE ATTACHED CHART, ON 4/18/2012.

PRESSURE UP 7" PRODUCTION CASING - 3.5 INJECTION TUBING TO 550 PSI, DID NOT HOLD PRESSURE AS PER NMOCD GUIDELINES.

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 Albert Giussani TITLE SENIOR ENGINEERING ADVISOR DATE 5/15/2012

Type or print name Al Giussani E-mail address: albert\_giussani@oxy.com PHONE: 806 638 1296

**For State Use Only**

APPROVED BY: El Martin TITLE **DISTRICT SUPERVISOR** DATE 8/30/2012

Conditions of Approval (if any):

REPAIR DUE  
BY 9/30/2012

