

Submit 3 Copies To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised March 25, 1999

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

WELL API NO.
30-059-20456

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
L-6228

7. Lease Name or Unit Agreement Name:

Bravo Dome Carbon Dioxide Gas Unit
2333

8. Well No.

261A

9. Pool name or Wildcat

Bravo Dome CO₂ Gas Unit 640 Acre Area

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 ☐ Gas Well ☐ Other CO₂

2. Name of Operator

OXY USA, Inc.

3. Address of Operator

P. O. Box 303, Amistad, NM 88410

4. Well Location

Unit Letter A : 660 feet from the North line and 330 feet from the East line

Section 26

Township 23-N

Range 33-E

NMPM

Union

County

10. Elevation (Show whether DR, RKB, RT, GR, etc.)

4986' GL

11. 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 COMPLETION ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

12. 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 recompilation.

11/28/2005 - Well was shut-in pending PxA due to high water production and low CO₂ gas production. PxA work scheduled for summer 2006.

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

SIGNATURE DJ Holcomb TITLE Team Leader DATE 12-19-2005

Type or print name Danny J. Holcomb

Telephone No. 505-374-3010

(This space for State use)

APPROVED BY [Signature] TITLE DISTRICT SUPERVISOR DATE 12/21/05

Conditions of approval, if any: