

Submit 1 Copy 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  
October 13, 2009

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

<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.) 1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <b>DISPOSAL WELL</b>		WELL API NO. <b>30-059-20204</b>
2. Name of Operator <b>OXY USA Inc.</b>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
3. Address of Operator <b>P.O. Box 303, AMISTAD, NM 88410</b>		6. State Oil & Gas Lease No.
4. Well Location Unit Letter <b>A</b> : <b>956</b> feet from the <b>NORTH</b> line and <b>956</b> feet from the <b>SOUTH</b> line Section <b>32</b> Township <b>19N</b> Range <b>34E</b> NMPM <b>UNION</b> County		7. Lease Name or Unit Agreement Name <b>BRAVO DOME CARBON DIOXIDE GAS UNIT (BDCDGU)</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>GL: 4912'</b>		8. Well Number <b>321 (SWD)</b>
		9. OGRID Number <b>16696</b>
		10. Pool name or Wildcat <b>BRAVO DOME CARBON DIOXIDE GAS UNIT 640 ACRE AREA</b>

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 ☐

SUBSEQUENT REPORT OF:

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

OTHER: ☐

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.

8/5/2015

MIRU pump & water tank

Pump 1/3 of a bbl to load well

Pressure up well to 580#

Bleed of to 565#

Run chart for approx. 47 Min (0900-0947)

Bleed pressure off well

Shut down chart recorder

Rig down pump and water tank

Spud Date:

Rig Release Date:

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

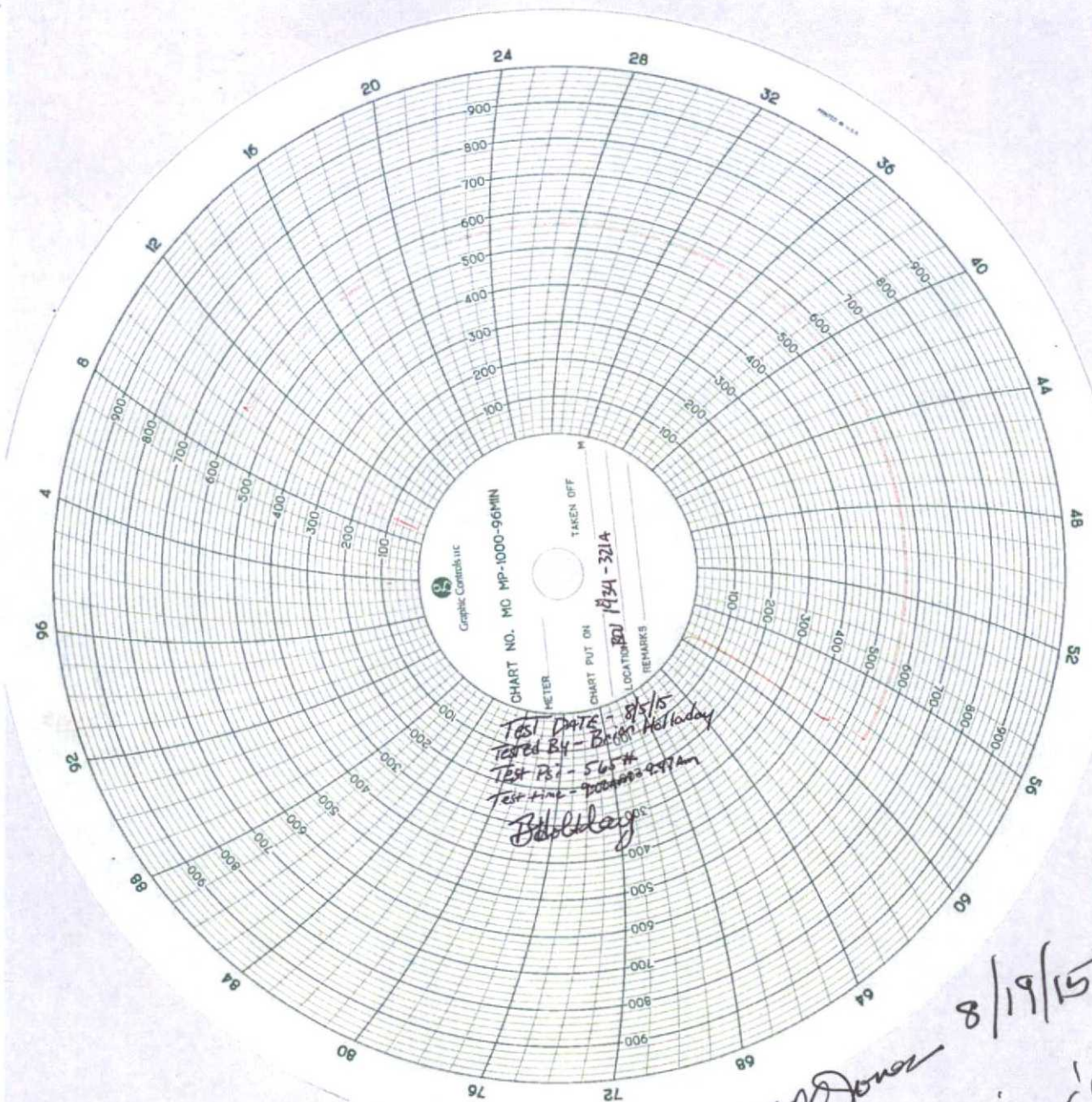
SIGNATURE Albert Giussani TITLE SR ENG ADVISOR DATE 08/17/2015

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

For State Use Only

APPROVED BY: Will Jones TITLE DISTRICT IV SUPERVISOR DATE 8/19/15

Conditions of Approval (if any):



Will Jones 8/19/15

Perf 1914-1996' GWRITA?

PKR ≈ 1803'

Last MIT 10/2/12

383 PSI MAX

SWD-357

12/28/12