

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 87240
District II
811 South First, Artesia, NM 87210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

Form C-103
Revised March 25, 1999

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.)		WELL API NO. 30-059-20407
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other CO2 Supply Well		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator OXY USA Inc. 16696		6. State Oil & Gas Lease No. ...
3. Address of Operator P.O. Box 50250 Midland, TX 79710-0250		7. Lease Name or Unit Agreement Name: Bravo Dome Carbon Dioxide Gas Unit 1934
4. Well Location Unit Letter <u>A</u> : <u>990</u> feet from the <u>north</u> line and <u>990</u> feet from the <u>east</u> line Section <u>19</u> Township <u>19N</u> Range <u>34E</u> NMPM County <u>Union</u>		8. Well No. 192
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 4937.9'		9. Pool name or Wildcat Bravo Dome Carbon Dioxide Gas 640

11. 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"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: Completion <input checked="" type="checkbox"/>	

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.

See Other Side

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

SIGNATURE David Stewart TITLE Sc. Regulatory Analyst DATE 9/8/03

Type or print name David Stewart Telephone No. 432-685-5717

(This space for State use)

APPROVED BY [Signature] TITLE DISTRICT SUPERVISOR DATE 9/8/03

Conditions of approval, if any

BDCDGU 1934-192

8/11/03

MI & RUWL R Compensated Neutron, Gamma Ray, Collar Log PBTD 2456'
MI & RUSU R 2.375 Tbg to 2440' Swb Well Dry P & LD Tbg RD & MOSU
Dump 5 BBL 15% HCL Acid + 5 BBL 6% KCL

8/12/03

MI x RUWL R 3.125" Perf Guns Perforate 4 DPJSPF
2305' to 2435' = 520 Holes @ .42"
Flow well to Production @ 1.7 MMCF/ day

8/27/03

Frac Down Csg with 329 BBL gel KCL mixed with 58 Tons of CO2
Containing 612 sx 12/20 Brady Sn
Max TP - 1254 psi Avg TP - 984 psi Max IR - 47 bpm AIR - 42 bpm
ISIP - 913 psi 5 min SIP - 400 psi 10 min SIP - 356 psi 15 min SIP - 338 psi
Flow well to pit on .50" choke