Submit 3 Copies To Appropriate District Office State of New Mexico Energy, Minerals and Natural Resources	Form C-103 May 27, 2004
1625 N. French Dr., Höbbs NM 87240/ [-	WELL API NO. 30-021- 20388
1301 W. Grand Ave., Artesia, NM 88210	5. Indicate Type of Lease
District III 1000 Rio B 2008 REFERENCE 7M SPORT 1 13 Santa Fe, NM 87505	STATE S FEE
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	6. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name:
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	Bravo Dome Carbon Dioxide Gas Unit
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	1832
1. Type of Well:	8. Well Number
Oil Well Gas Well Other CO2 Supply	(8)
2. Name of Operator	9. OGRID Number
OXY USA Inc. 3. Address of Operator	16696 10. Pool name or Wildcat
P.O. Box 50250 Midland, TX 79710-0250	Bravo Dome Carbon Dioxide Gas 640
4. Well Location	
Unit Letter G: 1700 feet from the worth line and 1700 feet from the east line	
Section 18 Township 18N Range 32E	NMPM County Harding
11. Elevation (Show whether DR, RKB, RT, GR, etc.	
4545.1'	
Pit or Below-grade Tank Application or Closure	
Pit type $\underline{\text{Syn}}$ Depth to Groundwater $\underline{>100}$ Distance from nearest fresh water well $\underline{>1000}$ Distance from nearest surface water $\underline{>1000}$	
Pit Liner Thickness: 12 mil Below-Grade Tank: Volume bbls; Construction	n Material
12. Check Appropriate Box to Indicate, Nature of Notice, NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLII PULL OR ALTER CASING MULTIPLE CASING TEST AND CEMENT JOB	SEQUENT REPORT OF: ALTERING CASING
OTHER: Request 1 year extension	
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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.	
OXY USA Inc. respectfully requests that the APD for the above mentioned well be granted a one year	
extension. This permit will expire 41268. Please see attached for a copy of the C-101.	
NEW EXPIRATION DATE 4/12/09	•
I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines X , a general permit or an (attached) alternative OCD-approved plan	
SIGNATURETITLETITLETITLETITLETITLETITLETITLETITLE	ory Analyst DATE 325 08
Type or print name David Stewart E-mail address:	Telephone No. 432-685-5717
For State Use Only O and -	SIIDEDVICAD
	SUPERVISOR 3/31/08
Conditions of Approval, if any:	