	Submit 3 Copies To Approp	priate District		New Me					rm C-103
	Office District 1		Energy, Minerals a	ind Natur	al Resources			Ma	ay 27, 2004
<u> </u>	Obstrict I 625 N. French Div Houbs Obstrict II	NM 87240				WELL API		- 20 39 (_
	301 W. Grand Ave., Artesi	ia. NM 88210	OIL CONSERY			5. Indicate			2
a I	District III 7 PM Aztec	13.7410	1220 South				TE 🔀	FEE [٦
1	District IV		Santa P	Fe, NM 8	/303	6. State O			
	220 S. St. Francis Dr., Sant	ta Fe, NM 87505		· · · · · · · · · · · · · · · · · · ·		o. State O	1 & Gas E		
			ES AND REPORTS			7. Lease N	ame or Ur	nit Agreemer	nt Name:
			SALS TO DRILL OR TO ATION FOR PERMIT" (F			Bravo Dor	ne Carbor	n Dioxide (Gas Unit
	PROPOSALS.)	1. OOL ALLEIO	ATTOM OTT LINE (I	011111 0 10	1,101100011		193	2	
	1. Type of Well:					8. Well Nu			
		as Well	Other CO2 Sup	<u>ply</u>			30	1	
2	. Name of Operator					9. OGRID		_	
-	OXY USA Inc.					10 5	16696		
	3. Address of Operato		V 70710-0250			10. Pool n			Cac 640
_	P.O. Box 50250 Well Location	Mildiand, I	X /9/10-0250			I BLANO DOI	ne carpor	<u>n Dioxide (</u>	adS 04U
					t .	l			
	Unit Letter T	<u>- : [] </u>	feet from the	e Nov	th line and	1700	feet from	the <u>wes</u>	line
	Section 3	Ö	Township	1981	Range 32E	NMPM		County	Warding
_	Section 3	, <u>o</u>			DR. RKB. RT. GR. et			County	Harding
		<i>૧ હોર્જ કર્યો</i>	Tr. Elevation (onon	456		.,			
]	Pit or Below-grade Tank A	Application X	or Closure						
	Pit type Syn Depth to Groundwater >100' Distance from nearest fresh water well >1000' Distance from nearest surface water >1000'								
Pit Liner Thickness: 12 mil Below-Grade Tank: Volumebbls; Construction Material								_	
Ľ									
P	NOTIC ERFORM REMEDIAL			ON 🔲	REMEDIAL WORK	SEQUEN	∏ REPO	JRT OF: ALTERING	CASING [
-	EMPORARILY ABAND	OON [CHANGE PLANS		COMMENCE DRILL	ING OPNS.		PLUG AND ABANDONI	
>	ULL OR ALTER CASI	NG 🗆	MULTIPLE COMPLETION		CASING TEST AND CEMENT JOB			710/11100/11	(V) (L) (V)
С	THER: Request 1 y	year extensi	on	\square	OTHER:				Г
-	· · · · · · · · · · · · · · · · · · ·			tata all ma	<u> </u>			11	
	of starting any pro	a or completed anosed work)	l operations. (Clearly s SEE RULE 1103. Fo	rate an pe or Multipl	e Completions: Attacl	e pertinent d vallbora di	ates, inclu-	ding estimate	ed date
	or recompletion.	posed work).	SEE ROLL 1103. TO	n waanpa	c Completions. Attach	i welloofe uf	agiam oi p	proposed con	прецоп
	F								
	044 1104 7								
	UXY USA Inc. res	pectfully re	equests that the A	.PD for t	the above mentione	d well be	granted a	a one year	
	extension This	· normit wil	l expire <u> </u>	~G	Dlages are attach	h.a.d. C			
	CAUCHSTON. 11113	permit wit	expire tile	.00	.Prease see attac	ned for a	copy of 1	the C-101.	
		1 - 40:	RATION DA	_	11.				
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	Nea	J EXPA			7/ -/				
	Neu	J EXPA			-77-7			-	
Ī						e and belief	I further ce	rtify that any i	nit or helow.
Ī	hereby certify that the	information al	bove is true and compl	lete to the	best of my knowledg	e and belief.	I further ce	rtify that any pative OCD-app	pit or below- proved plan [
K	hereby certify that the	information al	bove is true and compl	lete to the	best of my knowledg	or an (atta	ched) altern	ative OCD-app	proved plan
g	hereby certify that the	information al	bove is true and compl	lete to the CD guideline	best of my knowledg X A general permit Sr. Regula	or an (atta	ched) altern	ative OCD-app	proved plan
g S	hereby certify that the	e information al	bove is true and compl	lete to the CD guideline	best of my knowledg	or an (atta	ched) altern StD	ative OCD-app	oroved plan [25 (<i>0</i> 8
g S T	hereby certify that the rade tank has been/will be IGNATURE	e information all constructed or constructed or con	bove is true and completored according to NMOC	lete to the CD guideline	best of my knowledg X A general permit Sr. Regula	or an (atta	ched) altern StD	ATE 3	oroved plan [25 (<i>0</i> 8
g S T	hereby certify that the rade tank has been/will be	e information al	bove is true and completored according to NMOC	lete to the CD guideline TIT E-r	best of my knowledg X A general permit Sr. Regula	or an (atta	ched) altern St D Telepho	ATE3\cdots one No. 432	oroved plan [25 08 -685-5717

Conditions of Approval, if any: