

Submit 1 Copy To Appropriate District Office
District I – (575) 393-6161
1625 N. French Dr., Hobbs, NM 88240
District II – (575) 748-1283
811 S. First St., Artesia, NM 88210
District III – (505) 334-6178
1000 Rio Brazos Rd., Aztec, NM 87410
District IV – (505) 476-3460
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised July 18, 2013

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

WELL API NO. 30-015-45087
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.

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.)		7. Lease Name or Unit Agreement Name OXBOW CC 17 8 FEDERAL COM
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		8. Well Number 35H
2. Name of Operator OXY USA INC		9. OGRID Number 16696
3. Address of Operator 5 GREENWAY PLAZA SUITE 110, HOUSTON TX 77046		10. Pool name or Wildcat PIERCE CROSSING; BONESPRING, EAST / PIERCE CROSSING; BONE SPRING / CEDAR CANYON BS
4. Well Location Unit Letter P : 601 feet from the SOUTH line and 1236 feet from the EAST line Section 17 Township 24S Range 29E NMPM County EDDY		
11. Elevation (Show whether DR, RKB, RT, CR, etc.)		

12. 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"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: SURFACE COMMINGLE – PLC 750-C <input checked="" type="checkbox"/>		OTHER: <input type="checkbox"/>	

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.

OXY USA INC requests approval to add Oxbow CC "17_8" Federal Com #35H to PLC 750-C. This well will be included in a currently approved pools of PIERCE CROSSING; BONESPRING, EAST and PIERCE CROSSING; BONE SPRING and CEDAR CANYON BS and currently approved proposed consolidated leases (CA BS 20-29 E2 T24S R29E) in PLC 750-C.

The facilities described in PLC 750C are unchanged – each facility has a sales-quality orifice meter (BLM gas FMP or equivalent meter) that continuously measures gas volume before it leaves the facility. Production upstream of the facility gas FMP or equivalent meter is allocated to each well based on well test.

This request is for gas production only. Oil production will be handled through an amendment to PLC-661-B for Salt Flat Battery Train #4 (C-20-24S-29E).

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 Emily Messer TITLE REGULATORY ENGINEER DATE 07/20/22

Type or print name EMILY MESSER E-mail address: EMILY_MESSER@OXY.COM PHONE: 713.497.2076

For State Use Only

APPROVED BY: Dean R. McClure TITLE Petroleum Engineer DATE 08/05/2022

Conditions of Approval (if any):

District I
1625 N. French Dr., Hobbs, NM 88240
Phone: (505) 393-6161 Fax: (505) 393-0720
District II
811 S. First St., Artesia, NM 88210
Phone: (505) 748-1283 Fax: (505) 748-9720
District III
1000 Rio Brazos Road, Aztec, NM 87410
Phone: (505) 334-6178 Fax: (505) 334-6170
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505
Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico
Energy, Minerals & Natural Resources Department
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-102
Revised August 1, 2011
Submit one copy to appropriate
District Office

☒ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30-015-45087	Pool Code 50371/96473/11520	Pool Name PIERCE CROSSING BONE SPRING/PIERCE CROSSING BONE SPRING EAST/ CEDAR CANYON BONE SPRING
Property Code 321633	Property Name OXBOW CC "17_8" FEDERAL COM	Well Number 35H
OGRID No. 16696	Operator Name OXY USA INC.	Elevation 2926.5'

Surface Location

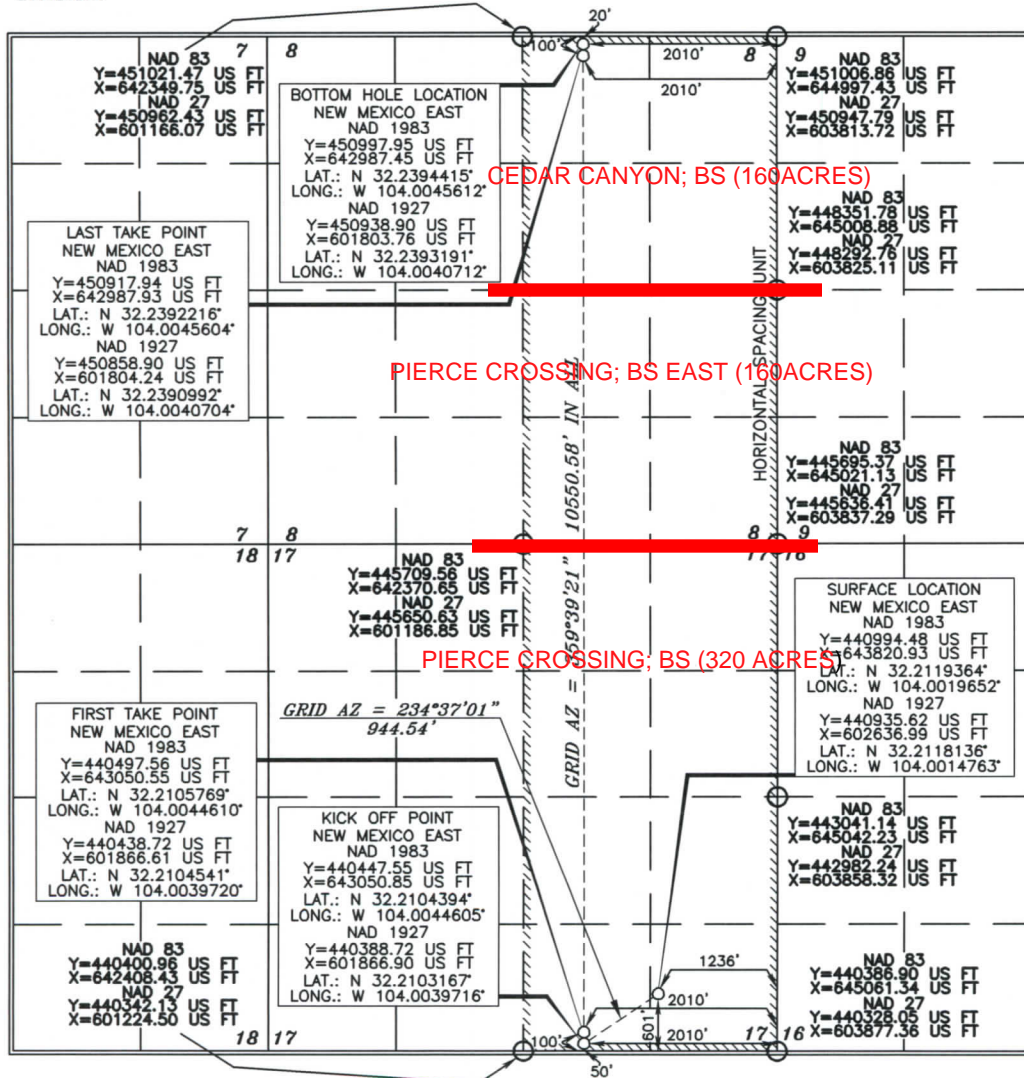
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
P	17	24 SOUTH	29 EAST, N.M.P.M.		601'	SOUTH	1236'	EAST	EDDY

Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
B	8	24 SOUTH	29 EAST, N.M.P.M.		20'	NORTH	2010'	EAST	EDDY

Dedicated Acres 640	Joint or Infill	Consolidation Code	Order No.
-------------------------------	-----------------	--------------------	-----------

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.



OPERATOR CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

Leslie T. Reeves 4/18/22
Signature Date

LESLIE REEVES
Printed Name
LESLIE_REEVES@OXY.COM
E-mail Address

SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.

DECEMBER 11, 2018
Date of Survey
Tony J. Abel 4/7/2021
Signature and Seal of Professional Surveyor
Certificate Number 15079

WO# 181211WL-a (Rev. D) (KA)