

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. 30-015-47592
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name HEADS CC 9_4 FEDERAL COM
8. Well Number 41H
9. OGRID Number 16696
10. Pool name or Wildcat PURPLE SAGE WOLFCAMP
11. Elevation (Show whether DR, RKB, RT, GR, etc.)

**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.)

1. Type of Well: Oil Well  Gas Well  Other

2. Name of Operator  
OXY USA INC

3. Address of Operator  
5 GREENWAY PLAZA SUITE 110, HOUSTON TX 77046

4. Well Location  
 Unit Letter C : 776 feet from the NORTH line and 1469 feet from the WEST line  
 Section 16 Township 24S Range 29E NMPM County EDDY

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
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 – OLM 259 <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 HEADS CC 9\_4 FEDERAL COM #41H to OLM 259 for Whomping Willow CTB Train #3 (F-15-T24S-R29E). This well will be included in a currently approved pools of PURPLE SAGE WOLFCAMP and currently approved proposed consolidated leases (CA WC 9-4 T24S R29E) in OLM 259. Allocation as stipulated in OLM 259. The C-102 is attached.

This request is for oil production only. Gas production will be handled through an amendment to PLC-750D.

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 08/30/22

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 09/02/2022

Conditions of Approval (if any):

