District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Avenue, Artesia, NM 88210
District III
1000 Rio Brazos Road, Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

## State of New Mexico Energy Minerals and Natural Resources

Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, NM 87505 Form C-141 Revised October 10, 2003

Submit 2 Copies to appropriate District Office in accordance with Rule 116 on back side of form

| Release Notification and Corrective Action  |   |  |  |   |                               |  |   |                                    |   |   |                                |                               |                  |  |  |
|---|---|--|--|---|-------------------------------|--|---|------------------------------------|---|---|--------------------------------|-------------------------------|------------------|--|--|
| LAMLA   | 13290   | OPERATOR Initial Report                      |  |   |                               |  |   | Final                              | Report                                      |   |                                |                               |                  |  |  |
| Name of Company OXY USA WTP LP 16696  |   |  |  |   |                               |  | Contact CAMPBELL, RODNEY                                      |                                    |   |   |                                |                               |                  |  |  |
|   |   |  |  |   |                               |  | Telephone No. (575) 628-4167                                  |                                    |   |   |                                |                               |                  |  |  |
| Facility Nat  | ne INDIA  | Facility Type GAS PROCESSING FACILITY        |  |   |                               |  |   |                                    |   |   |                                |                               |                  |  |  |
| Surface Owner Mineral Owner II  |   |  |  |   |                               |  | INDIAN BASIN Lease No.  |                                    |   |   |                                |                               |                  |  |  |
|   |   |  |  | LOCA  | TIO                           | N OF REI   | LEASE   |                                    |   |   |                                |                               |                  |  |  |
| Unit Letter   | Section   | Township                                     | Range  | Feet from the   | Nortl                         | h/South Line                                     | Feet from the   | East/\                             | West Line County                            |   |                                |                               |                  |  |  |
| G   | 23  | 21-S   | <b>23-</b> E   |   |                               |  |   |                                    |   | Eddy  |                                |                               |                  |  |  |
| Latitude 32°27'52.502" Longitude 104°34'28.004"   |   |  |  |   |                               |  |   |                                    |   |   |                                |                               |                  |  |  |
| NATURE OF RELEASE   |   |  |  |   |                               |  |   |                                    |   |   |                                |                               |                  |  |  |
| Type of Release Gas   |   |  |  |   |                               |  | Volume of Release 207.73 MCF Volume Recovered 0               |                                    |   |   |                                |                               |                  |  |  |
| Source of Release   |   |  |  |   |                               |  |   |                                    |   |   |                                | Iour of Discovery             |                  |  |  |
| Residue Flare   |   |  |  |   |                               |  | 10/6/2012 5:52:00 PM 10/6/2012 5:52:00 PM                     |                                    |   |   |                                |                               |                  |  |  |
| Was Immediate Notice Given?  ☐ Yes ☐ No ☒ Not Required  |   |  |  |   |                               |  | If YES, To Whom?  |                                    |   |   |                                |                               |                  |  |  |
| By Whom? N/A  |   |  |  |   |                               |  | Date and Hour N/A   |                                    |   |   |                                |                               |                  |  |  |
| Was a Watercourse Reached?  |   |  |  |   |                               |  | If YES, Volume Impacting the Watercourse. N/A                 |                                    |   |   |                                |                               |                  |  |  |
| ☐ Yes ☒ No  |   |  |  |   |                               |  |   |                                    |   |   |                                |                               |                  |  |  |
| If a Watercourse was Impacted, Describe Fully.* N/A   |   |  |  |   |                               |  |   |                                    | F   | OCT 1                                       |                                |                               |                  |  |  |
| Describe Cause of Problem and Remedial Action Taken.*  Cause:  FLARED RESIDUE GAS FOR 12 MINUTES DUE TO HIGH OXYGEN CONTENT.  Remedial Action Taken:  OPERATIONS SAMPLED INLET GATHERING LINE FOR EXCESSIVE 02. OPERATOINS NOTIFIED ON CALL MAINTINANCE AND MEASURMENT. DUE TO THE SHORT DURATION OF THE FLARE EVENT THE SOURCE OF 02 COULDN'T BE DETERMINED. |   |  |  |   |                               |  |   |                                    |   |   |                                |                               |                  |  |  |
| N/A   |   | and Cleanup A                                |  |   | 1-4- 4-                       | did c  |   | •                                  |   |   | 0.67                           |                               |                  |  |  |
| regulations a<br>public health<br>should their or<br>or the enviro  | II operators<br>or the envir<br>operations h<br>nment. In a | are required to ronment. The ave failed to a | o report ar<br>acceptance<br>adequately<br>OCD accep | e is true and comp<br>nd/or file certain race of a C-141 report<br>investigate and rotance of a C-141 | elease<br>ort by ti<br>emedia | notifications a<br>he NMOCD m<br>ate contaminati | nd perform correct<br>arked as "Final R<br>on that pose a thr | ctive act<br>eport" of<br>eat to g | tions for rel<br>does not rel<br>round wate | eases which<br>ieve the ope<br>r, surface w | may en<br>rator of<br>ater, hu | ndange<br>f liabili<br>man he | r<br>ty<br>ealth |  |  |
|   |   | n  |  |   |                               |  | OIL CON   | SERV                               | ATION                                       | DIVISIO                                     | <u>N</u>                       |                               |                  |  |  |
| Signature: Ray Call   |   |  |  |   |                               |  | A   |                                    |   |   | contact for many               |                               |                  |  |  |
| Printed Name  |   | Approved by District Supervisor:             |  |   | 7668                          | Accepted for record NMOCD                        |   |                                    |   |   |                                |                               |                  |  |  |
| Title: HES specialit  |   |  |  |   |                               | OCT 1 7 2013 Approval Date: Expiration Date:     |   |                                    |   |   |                                |                               |                  |  |  |
| j   | •   |  |  |   |                               |  |   |                                    | <u> </u>                                    |   |                                |                               |                  |  |  |
| E-mail Addre  | ess: RODNI  | EY_CAMPBE                                    |  | Conditions of Approval:   |                               |  |   | Attached                           |   |   |                                |                               |                  |  |  |

Attach Additional Sheets If Necessary

Date: 10/8/2012

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