

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., 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-103
Revised March 25, 1999

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.)		WELL API NO. 30-059-20355
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other CO ₂		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator OXY USA, Inc.		6. State Oil & Gas Lease No.
3. Address of Operator P. O. Box 303, Amistad, NM 88410		7. Lease Name or Unit Agreement Name: Bravo Dome Carbon Dioxide Gas Unit 2234
4. Well Location Unit Letter <u>D</u> : <u>582</u> feet from the <u>North</u> line and <u>724</u> feet from the <u>West</u> line Section <u>21</u> Township <u>22N</u> Range <u>34E</u> NMPM Union County		8. Well No. 213D
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 4889' GL		9. Pool name or Wildcat Bravo Dome CO ₂ Gas Unit 640 Acre Area

11. 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 checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

12. 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 recompilation.

11-30-00 - MI x RU WL, run sinker bar to check for fill, tag fill at 2250' (bottom perf at 2354', 104' of perfs covered), RD x MO WL
8-16-01 - MI x RUSU, kill well, NU BOP, RIH with 4 3/4" bit, bit sub, 2 3/8" workstring, tag fill at 2255', RU foam unit x swivel, clean out sand 2255' - 2396', circ well, RD swivel x foam unit, pull and LD workstring, bit sub, bit x ND BOP, open well to tank for 4 hours to clean up, rec 20 bbls of load water, turn well to sales, RD x MOSU

PPWO - 500 mcf/d

PAWO - 610 mcf/d

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE DJ Holcomb TITLE Team Leader DATE 9-25-2001

Type or print name Danny J. Holcomb

Telephone No. 505-374-3010

(This space for State use)

APPROVED BY R. E. [Signature] TITLE DISTRICT SUPERVISOR DATE 10/2/01
Conditions of approval, if any: