

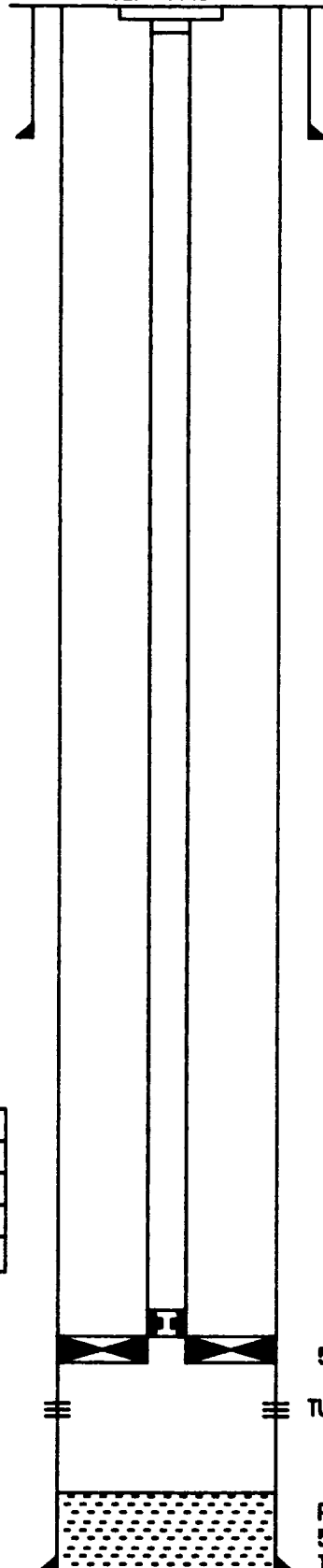
WEST BRAVO DOME CARBON DIOXIDE UNIT #5
1980' FSL & 1980' FML SEC 31 T19N R30E

ELEVATION: KB: 4456'
GL: 4446'

Ø 5/8" SURFACE CASING @ 652'
CMTD W/ 500 SX CNT. CIRC.

1 - 2 3/8" SN	1.10
1 - 2 3/8" X 5 1/2" GUIB UNI VI	6.00
56 - JTS 2 3/8" 4.7# J55 TBG	1766.06
TOTAL	1773.16
KB	10.00
SET AT	1783.16

	SURFACE	PRODUCTION	TUBING
SIZE	Ø 5/8"	5 1/2"	2 3/8"
WEIGHT	24 #	14 #	4.7 #
GRADE	K-55	K-55	J-55
THREAD	ST&C	ST&C	Ø&L EUE
DEPTH	652'	2150'	1783'



5 1/2" PACKER @ 1783'

TUBG PERFS (1927'- 1994')

PBTD @ 2092'
5 1/2" CS6 @ 2150' CMTD W/ 600 SX
TD @ 2150' CNT CIRC

PREP'D BY: JOE M. FLEMING
DATE : MAY 15, 1991

Submit 3 Copies
to Appropriate
District Office

District I

P.O. Box 1980, Hobbs, NM 88240

District II

P.O. Drawer DD, Artesia, NM 88210

District III

1000 Rio Brazos Rd. Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

Form C-103

Revised 1-1-89

WELL API NO.

30 - 021 - 20125

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

L5827

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

WEST BRAVO DOME CDG UNIT

1. Type of Well:

OIL
WELL ☐

GAS
WELL ☐

OTHER CO2 SUPPLY

2. Name of Operator

OXY USA INC.

8. Well No.

5

3. Address of Operator

P.O. Box 50250 Midland, TX 79710

9. Pool name or Wildcat

WEST BRAVO DOME

4. Well Location

Unit Letter K : 1,980 Feet From The SOUTH Line and 1,980 Feet From The WEST Line
Section 31 Township 19 N Range 30 E NMPM HARDING County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

4,446

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

REMEDIAL WORK ☐

ALTERING CASING ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

PULL OR ALTER CASING ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

OTHER: YEARLY BRADENHEAD TEST (SI) ☒

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.

TD - 2150' PBTD - 2092'

PERFS - 1927' - 1994'

YEAR

DATE

TBG PSI

CSG PSI

BD TIME

1990

11/27

490

0

1991

10/24

530

0

1992

9/21

460

0

1993

9/21

470

0

1994

1995

1996

1997

1998

1999

2000

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

SIGNATURE

TITLE

REGULATORY ANALYST

DATE 10 01 93

TYPE OR PRINT NAME

DAVID STEWART

TELEPHONE NO.

915 685-5717

(This space for State Use)

APPROVED BY

TITLE

DISTRICT SUPERVISOR

DATE 10-7-93

CONDITIONS OF APPROVAL, IF ANY: