

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

Form C-103
 Revised March 25, 1999

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

WELL API NO. 30-059-20068
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name: Bravo Dome Carbon Dioxide Gas Unit 2034
8. Well No. 261G
9. Pool name or Wildcat Bravo Dome CO ₂ Gas Unit 640 Acre Area
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 4775' GL

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 CO₂

2. Name of Operator
 OXY USA, Inc.

3. Address of Operator
 P. O. Box 303, Amistad, NM 88410

4. Well Location
 Unit Letter G : 1980 feet from the North line and 1980 feet from the East line
 Section 26 Township 20N Range 34E NMPM Union County

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

12-5-01 - MI x RUSU, pressure test backside to 500#, ok, kill well with 15 bbls of 50% produced water/50% methanol, NU BOP, unset packer, pull and lay down 2 7/8" fiberglass tubing, packer and tail joint, ND BOP, install 6" valve on top of tubing head, drop 6 soap sticks, RD x MOSU, leave well SI overnight.

12-6-01 - MI x RU WL, NU lubricator, run 30 arm caliper log to inspect casing ID (PBTD - 2301'), ND lubricator, RD x MOWL, flow well to test tank for 3 hours to cleanup, rec 0 bbls of load water, turn well to sales flowing up steel casing to begin pilot test program.

12-13-01 - MI x RUSU, NU lubricator and sand pump 2301' - 2358', recover 102 gallons of sand, ND lubricator, RD x MOSU, return well to sales.

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 12-14-2001

Type or print name Danny J. Holcomb Telephone No. 505-374-3010

(This space for State use)

APPROVED BY [Signature] TITLE DISTRICT SUPERVISOR DATE 12/18/2001

Conditions of approval, if any: