

State of New Mexico
Energy, Minerals & Natural Resources

Form C-101
Revised March 17, 1999

District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 S. 1st Street, Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
2040 South Pacheco, Santa Fe, NM 87505

Oil Conservation Division
2040 South Pacheco
Santa Fe, NM 87505

Submit to appropriate District Office
State Lease - 6 Copies
Fee Lease - 5 Copies

☐ AMENDED REPORT

APPLICATION FOR PERMIT TO DRILL, RE-ENTER, DEEPEN, PLUGBACK, OR ADD A ZONE

¹ Operator Name and Address ORX USA Inc. P.O. Box 50250 Midland, TX 79710-0250		² OGRID Number 16696
⁴ Property Code 27111	⁵ Property Name Bravo Dome Carbon Dioxide Gas Unit 1934	³ API Number 30- 059- 20382 ⁶ Well No. 092

⁷ Surface Location									
UL or lot no.	Section	Township	Range	Lot. Idn	Feet from the	North/South Line	Feet from the	East/West line	County
C	9	19N	34E		173	north	2291	west	Union

⁸ Proposed Bottom Hole Location If Different From Surface									
UL or lot no.	Section	Township	Range	Lot. Idn	Feet from the	North/South Line	Feet from the	East/West line	County

⁹ Proposed Pool 1 Bravo Dome Carbon Dioxide Gas 640		¹⁰ Proposed Pool 2 96010
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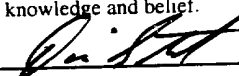
¹¹ Work Type Code N	¹² Well Type Code C	¹³ Cable/Rotary R	¹⁴ Lease Type Code P	¹⁵ Ground Level Elevation 4835.8'
¹⁶ Multiple No	¹⁷ Proposed Depth 2600'	¹⁸ Formation Tubb	¹⁹ Contractor N/A	²⁰ Spud Date 8/1/02

²¹ Proposed Casing and Cement Program					
Hole Size	Casing Size	Casing weight/foot	Setting Depth	Sacks of Cement	Estimated TOC
12-1/4"	8-5/8"	24#	700'	300sx	Surface
7-7/8"	5-1/2"	5.9#FG/15.5#	2600'	300sx	Surface

²² Describe the proposed program. If this application is to DEEPEN or PLUG BACK, give the data on the present productive zone and proposed new productive zone.
Describe the blowout prevention program, if any. Use additional sheets if necessary.

SEE OTHER SIDE

²³ I hereby certify that the information given above is true and complete to the best of my knowledge and belief.

Signature: 

Printed name: **David Stewart**

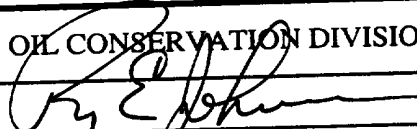
Title: **Sr. Regulatory Analyst**

Date: **7/18/02**

Phone:

915-685-5717

OIL CONSERVATION DIVISION

Approved by: 

Title: **DISTRICT SUPERVISOR**

Approval Date: **7/18/02**

Expiration Date: **7/18/03**

Conditions of Approval:

Attached ☐

ATTACHMENT C-101
BDCDGV 1934 - 092

PROPOSED TD: 2600' TVD

BOP PROGRAM: 0-700' None

700-2600' 8" 3M blind & pipe ram with stripper head.

CASING: Surface: 8-5/8" OD 24# J55 8rd ST&C new casing set at 700'
12-1/4" hole
Centralizers from TD-Surf, every fourth joint
Production: 5-1/2" OD new casing from 0-2600'
300'-15.5# J55 8rd LTC 2300'-5.9# 10rd FG
7-7/8" hole - 5 centralizers

*This well will have fiberglass casing from surface to the productive interval (Tubb). Steel casing will be used across the Tubb. The fiberglass casing must penetrate the Cimarron at a minimum. The optimum point for setting the fiberglass casing is at the midpoint of the Cimarron formation.

CEMENT: Surface - Circulate cement with 300sx Premium Plus with 2% CaCl_2 + .25#/sx Poly E Flake, (WT-14.8ppg, Yld-1.34cf/sx, FW-6.3g/sx)

Production - Cement with 150sx Premium Plus with 3% CaCl_2 + .25#/sx Poly E Flake, (WT-11.1ppg, Yld-3.27cf/sx, FW-20.47g/sx) followed by 150sx Premium Plus with 3% CaCl_2 + .25#/sx Poly E Flake, (WT-13.2ppg, Yld-1.86cf/sx, FW-9.93g/sx)

MUD: 0-700' Fresh water/native mud.
Wt 8.6-9.2ppg, Vis 32-36sec

700-2600' Fresh water/Starch/Gel
pH control as needed.
Wt 9.0-9.2ppg, Vis 28-29sec

ESTIMATED FORMATION TOPS:

Tubb- 2231 ' Cimarron- 2212 ' San Andres- 1446 ' Santa Rosa- 1159 '

Document 1
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Document 2
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Document 3
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Document 10
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Document 11
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Document 12
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INNOVATION REPORT

Project Name		Project Number		Project Status	
Project Description		Project Location		Project Date	
Project Manager		Project Sponsor		Project Budget	
Project Team		Project Stakeholders		Project Risks	
Project Objectives		Project Deliverables		Project Milestones	
Project Timeline		Project Resources		Project Performance	
Project Results		Project Lessons Learned		Project Next Steps	

NOT ALLOWED TO BE USED FOR ANY OTHER PURPOSES. IF PATENTS HAVE BEEN CONSOLIDATED
AND/OR, PATENTS HAVE BEEN CONSOLIDATED BY THE DIVISION

REGULATOR IDENTIFICATION	
I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.	
Signature: [Signature]	
Name: David J. Ward	
Title: Regulatory Analyst	
Date: [Date]	
REGULATOR IDENTIFICATION	
I hereby certify that the information shown on this plot is true and complete to the best of my knowledge and belief.	
Signature: [Signature]	
Name: [Name]	
Title: [Title]	
Date: [Date]	

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OIL CONSERVATION DIVISION
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Form C-102

Revised October 18, 1994

Instructions on back

Submit to Appropriate District Office

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Fee Lease - 3 Copies

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number		² Pool Code 96010	³ Pool Name BRAVO DOME CARBON DIOXIDE GAS (640)
⁴ Property Code 27111	⁵ Property Name BRAVO DOME CARBON DIOXIDE GAS UNIT 1934		⁶ Well Number 092
⁷ OGRID No. 16696	⁸ Operator Name OXY USA INC.		⁹ Elevation 4885.8

¹⁰ Surface Location

UL or lot no.	Section	Township	Range	Lot Idn.	Feet from the	North/South line	Feet from the	East/West line	County
C	9	19 N	34 E		173'	NORTH	2281'	WEST	UNION

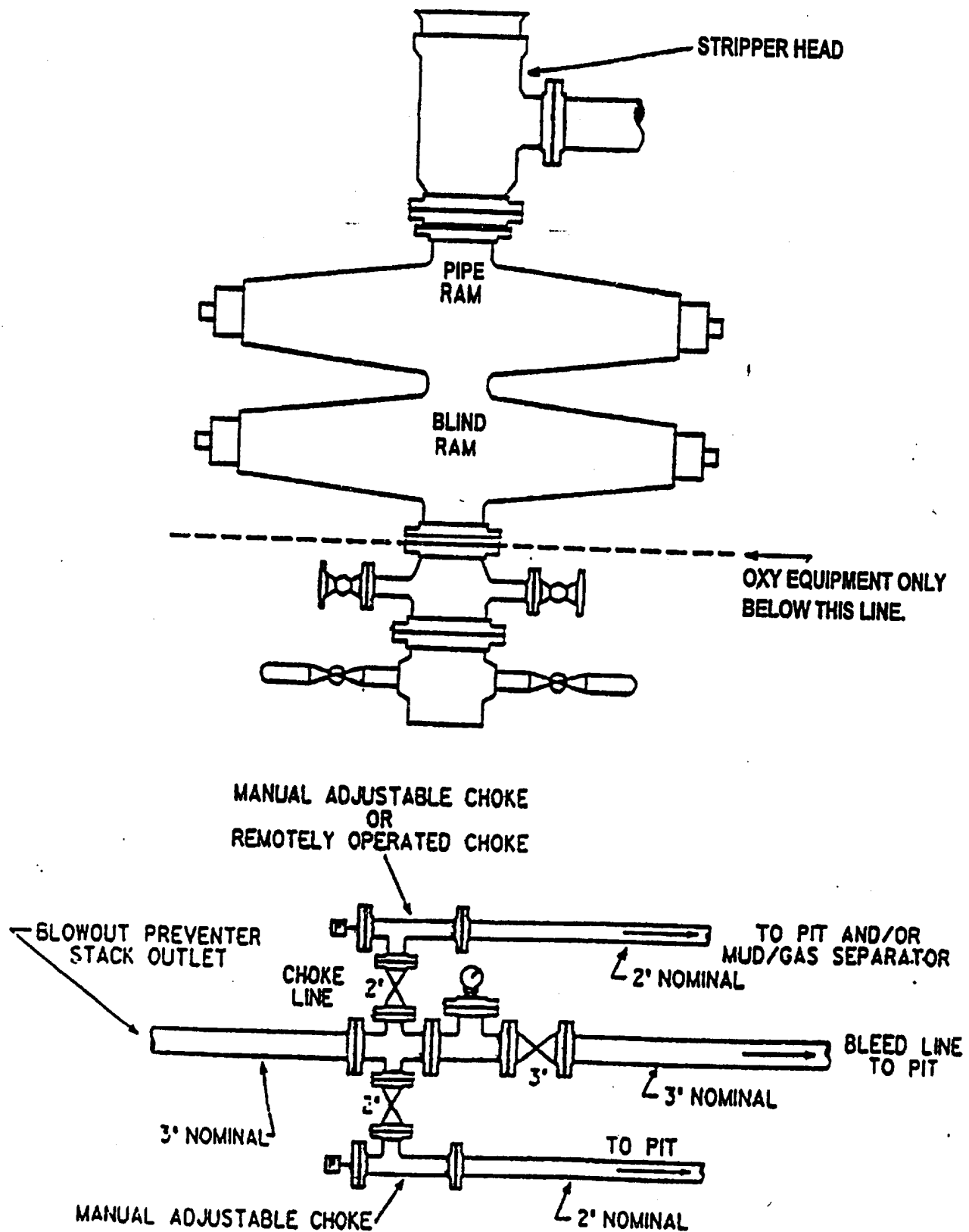
¹¹ Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn.	Feet from the	North/South line	Feet from the	East/West line	County
¹² Dedicated Acres 640	¹³ Joint or Infill 1	¹⁴ Consolidation Code		¹⁵ Order No.					

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

	¹⁷ OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief. <i>David Stewart</i> Signature David Stewart Printed Name Sr. Regulatory Analyst Title 7/1/02 Date
	¹⁸ SURVEYOR CERTIFICATION I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief. June 3, 2002 Date of Survey <i>Jesse M. Martin</i> Signature and Seal of Professional Surveyor Jesse M. Martin Certificate Number 7911

3000 psi WORKING PRESSURE BOP



NOTE: ADEQUATE SUBSTRUCTURE REQUIRED TO ACCOMMODATE ROTATING HEAD, BAGS, RAMS, ETC.