Semit 1 Copy To Appropriate District	State of New Mexico		Form C-103	
<u>District I</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources		WELL API NO.	ugust 1, 2011
<u>District II</u> – (575) 748-1283	OIL CONCEDIATION	DIVICION	MULITPLE WELLS	i
811 S. First St., Artesia, NM 88210 <u>District III</u> – (505) 334-6178	OIL CONSERVATION 1220 South St. Fran		5. Indicate Type of Lease	
1000 Rio Brazos Rd., Aztec, NM 87410			STATE FEE	
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505	Santa Fe, NM 87505		6. State Oil & Gas Lease No. NM-15003	
	TICES AND REPORTS ON WELLS		7. Lease Name or Unit Agreem	ent Name
(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.)			15-40853 MULTIPLE WELLS 15-40854	
1. Type of Well: Oil Well Gas Well Other			8. Well Number	
2. Name of Operator			9. OGRID Number	
OXY USA WTP LIMITED PARTNERSHIP 3. Address of Operator			192463 10. Pool name or Wildcat	
PO BOX 4294; HOUSTON, TX 77210			OLD MILLMAN RANCH – BON	E SPRING
4. Well Location				
Unit Letter	:feet from the	line and	feet from the	line
Section	Township Ra	inge	NMPM County	, , , ,
The second second second	11. Elevation (Show whether DR,	RKB, RT, GR, etc		10
	<u> </u>		. 6.21727	
12 Charle	Appropriate Box to Indicate N	oture of Notice	Papart or Other Date	
12. Check	Appropriate box to indicate in	ature of Notice,	, Report or Other Data	1
	NTENTION TO:		SEQUENT REPORT OF	
PERFORM REMEDIAL WORK				=
TEMPORARILY ABANDON [PULL OR ALTER CASING [_ · · - \			
DOWNHOLE COMMINGLE	•	CASING/CEMEN	, .	
90,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	· · · · · · · · · · · · · · · · · · ·			
OTHER: Correction of Name and		OTHER:		
	repleted operations. (Clearly state all powers). SEE RULE 19.15.7.14 NMAC			
proposed completion or re	ecompletion.			
OVV USA WTD LD respectfully r	equest that the wells listed in the attac	shed enreadsheet a	re properly correct to match the of	her wells that
	ing convention. Please review and if			
contact us at any time.		•	• •	
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Spud Date:	Rig Release Da	ate:		
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II have if all the information		11		
I hereby certify that the information	n above is true and complete to the be	est of my knowled	ge and belief.	
don It			•	
SIGNATURE // Muse	TITLE_REG	ULATORY SPEC	DATE_06/04/2013	
Type or print name IEMNIEED F	DUARTE E-mail address: jenni	fer duarta@avy a	om PHONE 713-512 6640	
For State Use Only	D-man addressemin	ici_duaric(woxy.co	<u></u> 1110146/15-313-0040	<u>;</u> ;
APPROVED BY:	TITLE DE	#Sypewise	7 DATE 6/7/0	20/3
Conditions of Approval (if any):	111LL		DATE W//O	

Current Property Code	Revised Property	Current Well Name	Revised Well Name	ULSTR	API
27657	39592	GOVERNMENT AB #011	Government AB Federal #011	F-10-20S-28E	30-015-40853
27657	39592	GOVERNMENT AB #014	Government AB Federal #014	E-10-20S-28E	30-015-40854

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