Submit 1 Copy To Appropriate District	State of New Mexico			Form C-103
Office <u>District I</u> – (575) 393-6161	Energy, Minerals and Natural Resources		WELL ADVAGO	Revised August 1, 2011
1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283			WELL API NO. 30-015-40074	
811 S. First St., Artesia, NM 88210	OIL CONSERVATION		5. Indicate Type	of Lease
<u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.			FEE
<u>District IV</u> – (505) 476-3460	Santa Fe, NM 87505		6. State Oil & G	as Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505			E0-4200	
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name of	or Unit Agreement 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			Tigger 9 State	
PROPOSALS.)			8. Well Number	. #2
1. Type of Well: Oil Well Gas Well Other				
2. Name of Operator OXY USA WTP LIMITED PARTNERSHIP			9. OGRID Number 192463	
3. Address of Operator			10. Pool name or Wildcat	
PO BOX 4294; HOUSTON, TX 77210			GJ;7RVS-QN-GB-GLORIETA-YESO (97558)	
4. Well Location				
Unit LetterI:_	1729'feet from theSOUTI	H line and _472	feet from th	neEASTline
Section 9	Township 17S Range	29E	NMPM	County EDDY
	11. Elevation (Show whether DR	, RKB, RT, GR, etc	c.)	
	356	58'		
12. Check A _I	opropriate Box to Indicate N	ature of Notice	, Report or Other	r Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
PERFORM REMEDIAL WORK				ALTERING CASING
TEMPORARILY ABANDON			RILLING OPNS.	P AND A
PULL OR ALTER CASING	LTER CASING MULTIPLE COMPL CASING/CEMEN			
DOWNHOLE COMMINGLE				
OTHER:	П	OTHER: Fit	rst Gas Sales	\bowtie
	ted operations. (Clearly state all	·		
of starting any proposed work	k). SEE RULE 19.15.7.14 NMAG			
proposed completion or reco	npletion.			
First Gas Sales: 04/08/2013				,
Meter number 727024-00				
Weter number 727024-00				
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Could Date:	Dia Dalassa D			
Spud Date:	Rig Release Da	ate:		
I hereby certify that the information al	pove is true and complete to the b	est of my knowled	lge and belief.	
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dans the della				
SIGNATURE AND MILES	TITLE_REGU	JLATORY SPECI	ALIST DA	TE _10-16-2013
Type or print name _JENNIFER DUA	RTE E mail address:	iennifer duerte@	OVV COM DUO!	NE: _713-513-6640
For State Use Only	A 12 E-man address:	_jemmer_duarte@	coxy.com PHOI	NL/15-315-0040
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APPROVED BY: Conditions of Approval (if any):	ell TITLE DIS	4 Uylen	_ DATE	<u> </u>
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