| Submit 1 Copy To Appropriate District   | State of New Mexico   | Form C-103                                       |
|---|---|--|
| Office <u>District I</u> – (575) 393-6161  Energy   | y, Minerals and Natural Resources                             | Revised July 18, 2013                            |
| 1625 N. French Dr., Hobbs, NM 88240<br>District II – (575) 748-1283   |   | WELL API NO.<br>30-015-40716                     |
| 811 S. First St., Artesia, NM 88210   | CONSERVATION DIVISION   | 5. Indicate Type of Lease                        |
| <u>District III</u> – (505) 334-6178<br>1000 Rio Brazos Rd., Aztec, NM 87410  | 1220 South St. Francis Dr.                                    | STATE FEE  |
| <u>District IV</u> – (505) 476-3460<br>1220 S. St. Francis Dr., Santa Fe, NM<br>87505   | Santa Fe, NM 87505  | 6. State Oil & Gas Lease No. FEDERAL             |
| SUNDRY NOTICES AND R  | EPORTS ON WELLS   | 7. Lease Name 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 PROPOSALS.) |   | ARTESIA YESO FEDERAL UNIT                        |
| 1. Type of Well: Oil Well Gas Well  | Other   | 8. Well Number 5                                 |
| 2. Name of Operator OXY USA WTP LP  | `   | 9. OGRID Number<br>192463                        |
| 3. Address of Operator  |   | 10. Pool name or Wildcat                         |
| PO BOX 4294; HOUSTON, TX 77210  |   | ARTESIA; GLORIETA-YESO (96830)                   |
| 4. Well Location  | A NORTH I 1005  | TAGE II  |
|   | the NORTH line and _1865'f Township 17S Range 28E             |  |
|   | Township 17S Range 28E on (Show whether DR, RKB, RT, GR, etc. | NMPM EDDY County                                 |
|   | 3628' GL  |  |
|   |   |  |
| 12. Check Appropriate   | Box to Indicate Nature of Notice,                             | Report or Other Data                             |
| NOTICE OF INTENTION   | ITO: SUB  | SEQUENT REPORT OF:                               |
| PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING  |   |  |
| TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS P AND A   |   |  |
| PULL OR ALTER CASING   MULTIPLE   | COMPL CASING/CEMEN  | T JOB  |
| DOWNHOLE COMMINGLE  |   | •  |
| OTHER:  | OTHER: Fire   | st Gas Sales                                     |
| 13. Describe proposed or completed operation  | ons. (Clearly state all pertinent details, an                 | d give pertinent dates, including estimated date |
|   | JLE 19.15.7.14 NMAC. For Multiple Co                          | mpletions: Attach wellbore diagram of            |
| proposed completion or recompletion.  |   |  |
| First Gas Sales: 07/15/2013   |   |  |
| Meter number 728835-00  |   |  |
|   |   |  |
|   |   | RECEIVED   |
|   |   | j  |
| •   |   | OCT 18 2013                                      |
|   |   | NIALOCO AD-                                      |
| •   |   | NMOCD ARTESIA                                    |
|   |   |  |
|   |   |  |
|   |   |  |
| Spud Date:  | Rig Release Date:   |  |
|   |   |  |
| I hereby certify that the information above is true   | and complete to the best of my knowleds                       | re and helief                                    |
| I moreove is use  | and complete to the best of my knowledg                       | ge and benef.                                    |
| handle de la man  | _   |  |
| SIGNATURE JULY WILLIAM SIGNATURE  | TITLE_REGULATORY SPECIAL                                      | ALIST DATE _10-17-2013                           |
| Type or print name _JENNIFER DUARTE   |   |  |
|   | E-mail address: iennifer duarte@a                             | oxy.com PHONE: 713-513-6640                      |
| For State Use Only  | E-mail address: _jennifer_duarte@o                            | oxy.com PHONE: _713-513-6640                     |
|   | E-mail address: _jennifer_duarte@d                            | DATE 10/+3/+0/3                                  |

APPROVED BY: Of Conditions of Approval (if any):