

Submit 1 Copy To Appropriate District Office  
 District I - (575) 393-6161  
 1625 N. French Dr., Hobbs, NM 88240  
 District II - (575) 748-1283  
 811 S. First St., Artesia, NM 88210  
 District III - (505) 334-6178  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV - (505) 476-3460  
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
 Energy, Minerals and Natural Resources

Form C-103  
 Revised July 18, 2013

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

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.)		WELL API NO. 30-015-40920
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator OXY USA WTP LP		6. State Oil & Gas Lease No. FEDERAL
3. Address of Operator PO BOX 4294; HOUSTON, TX 77210		7. Lease Name or Unit Agreement Name GOVERNMENT AB FEDERAL
4. Well Location Unit Letter <u>H</u> : <u>2080'</u> feet from the NORTH _____ line and <u>660'</u> feet from the <u>EAST</u> _____ line Section <u>10</u> Township <u>20S</u> Range <u>28E</u> NMPM <u>EDDY</u> County		8. Well Number <u>13</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3286' GL		9. OGRID Number 192463
10. Pool name or Wildcat ARTESIA; GLORIETA-YESO (96830)		

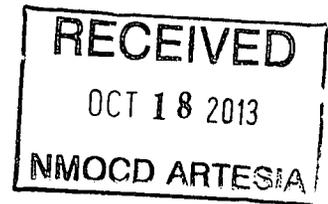
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/>		SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: First Gas Sales <input checked="" type="checkbox"/>	

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

First Gas Sales: 07/13/2013  
 Meter number 77336

www.emnrd.state.nm.us  
 Current forms are available on our website and should be used when filing regulatory documents.



Spud Date:  Rig Release Date:

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

SIGNATURE Jennifer Duarte TITLE REGULATORY SPECIALIST DATE 10-17-2013  
 Type or print name JENNIFER DUARTE E-mail address: jennifer\_duarte@oxy.com PHONE: 713-513-6640  
**For State Use Only**  
 APPROVED BY: [Signature] TITLE Dir. of Supervision DATE 10/28/2013  
 Conditions of Approval (if any):