

Submit 1 Copy To Appropriate District Office  
 District I - (575) 393-6161  
 1625 N. French Dr., Hobbs, NM 88240  
 District II - (575) 748-1234  
 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

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

JAN 30 2017

RECEIVED

WELL API NO. 30-015-29446
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name McCall
8. Well Number 1
9. OGRID Number 16696
10. Pool name or Wildcat Atoka Glorietta Yeso

**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.)

1. Type of Well: Oil Well  Gas Well  Other

2. Name of Operator  
OXY USA Inc.

3. Address of Operator  
P.O. Box 50250 Midland, TX 79710

4. Well Location  
 Unit Letter L : 1650 feet from the south line and 330 feet from the west line  
 Section 24 Township 18S Range 26E NMPM County Eddy

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3298

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

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

- 1/19/2017 MIRU PU, dig out WH and find surface valve
- 1/20/2017 Pump 50bbl 10# BW to kill well, POOH w/ rods & pump. NDWH, NU BOP & accumulator.
- 1/23/2017 POOH w/ tbg, RIH & set CIBP @ 2831', POOH. RIH w/ tbg & tag CIBP @ 2831'.
- 1/24/2017 Circ 10# MLF to surface, M&P 25sx CL C cmt, PUH, WOC. RIH & tag cmt @ 2467', POOH. RIH & set pkr @ 845', RIH & perf @ 1185', attempt to EIR, pressure up to 1500# w/ no rate. Bob Byrd-NMOCD approved spotting cmt, Rel pkr & POOH, RIH to 1235', M&P 40sx CL C cmt, PUH, WOC.
- 1/25/2017 RIH & tag cmnt @ 649', POOH. RIH & set pkr @ 32'. RIH & perf @ 430', EIR @ 1.5bpm @ 100#, M&P 130sx CL C cmt, circ cmt to surface, visually confirmed. RD BOP & accumulator, RDPU.

Approved for plugging of well bore only.  
 Liability under bond is retained pending receipt  
 of C-103 (Subsequent Report of Well Plugging)  
 which may be found at OGD Web Page under  
 Form C-103 www.enr.state.nm.us/ocd.

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 David Stewart TITLE Sr. Regulatory Advisor DATE 1/26/17

Type or print name David Stewart E-mail address: david\_stewart@oxy.com PHONE: 432-685-5717

For State Use Only

APPROVED BY: Robert J. [Signature] TITLE COMPLIANCE OFFICER DATE 1/30/17  
 Conditions of Approval (if any):