Office Office		ite of New Me				Forn	n C-103
<u>District I</u> – (575) 393-6161	Energy, Mir	nerals and Natu	ral Resour	ces	rtume	Revised July	y 18, 2013
1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283					WELL API NO. 30-015-30337		
811 S. First St., Artesia, NM 88210 OIL CONSERVATION DIVISION				N	5. Indicate Type of Lease		
District III – (505) 334-6178 1220 South St. Francis Dr.					STATE	FEE [1
1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> – (505) 476-3460 Santa Fe, NM 87505					6. State Oil & G		
1220 S. St. Francis Dr., Santa Fe, NM 87505		·				200001101	
	CES AND REPOR	TS ON WELLS	,		7 Lease Name	or Unit Agreement	t Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO				Α .	A		
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)					WINSTON S	WD	
1. Type of Well: Oil Well ☐ Gas Well ☐ Other ✔					8. Well Number	#004	
2. Name of Operator					9. OGRID Num	ber	
OXY USA WTP LP 3. Address of Operator					192463 10. Pool name or Wildcat		
PO BOX 4294, HOUSTON, TX 77210					SWD; DEVONIAN		
4. Well Location				-	1 32, 32. 3	,, u t	
Unit Letter E :	1535 feet fro	m the NORTH	line a	and 660	feet fro	om the WEST	line
Section 31	Towns	hip 21S Ra	inge 24E		NMPM	County EDD	7
	11. Elevation (SI	how whether DR,	RKB, RT,	GR, etc.,		and the second	
	<u> </u>						
12 Chack A	Appropriate Box	to Indicate N	ature of N	Intica	Danart or Other	r Data	
12. CHECK P	ippropriate Box	to marcate in	ature of r	ionce,	Report of Other	. Data	
NOTICE OF IN	TENTION TO:	•		SUB	SEQUENT RE	EPORT OF:	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIA				1		ALTERING CAS	
					LLING OPNS.	P AND A	
PULL OR ALTER CASING	MULTIPLE COM	IPL 🗌	CASING/	CEMEN	T JOB 📙		
DOWNHOLE COMMINGLE							
CLOSED-LOOP SYSTEM		[F]	OTUED.	Ì			
OTHER: 13. Describe proposed or comp	leted operations (OTHER:	taile and	d give pertinent de	tes including estin	mated date
of starting any proposed wo							
proposed completion or rec		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	o. 1 o. 141 u		inproved in the control of the contr	wenter anagram	01
·							
OXY USA WTP LP respectfully		y extension on	the subjec	t well fo	or the performand	e of the request	ed MIT fron
the original due date of 2/17/202	10 to 4/17/2020.						
Reference Inspection No: iDRS		•					
Federal Lease No. NM025235A						RECEIVE	n
						_	
						FEB 1 11 211	120
					EAAA		
					F-LAB 8	IRD-OCD A	ik iesik
·	 						
Spud Date:		Rig Release Da	ite:				
1			L				
					11 1 6		
I hereby certify that the information	above is true and c	omplete to the b	est of my kr	nowledg	e and belief.		
				L		0/7/00	
SIGNATURE JOSEPH SIGNATURE	THE	TITLE REGI	JLATORY	ADVI	SOR D	ATE 2/7/20	
Type or print name LESLIE REI	ÉVES 0	E-mail address	LESLIE	REEVE	S@OXY.COM P	HONE: 713-497	7-2492
For State Use Only			-	-			
•		TITLE CAM	م ام	ا م	officer D.	ATE 7 - 11	- 20
APPROVED BY: Conditions of Approval (if any):		_IIILE COP	Jenar		U.	AIE 6 11	
				1			