## State of New Mexico Energy, Minerals and Natural Resources Department

Michelle Lujan Grisham Governor

Sarah Cottrell Propst Cabinet Secretary

Todd E. Leahy, JD, PhD Deputy Secretary Adrienne Sandoval, Division Director Oil Conservation Division



## Notice of C-104 Denial and Request for Information

OCD denies your C-104 – Request for Allowable and Authorization to Transport because it is incomplete or conflicts with other information provided to OCD.

The sale or transport of product without a C-104 approved by OCD violates the Oil and Gas Act and the implementing rules, including 19.15.7.15 and 19.15.16.19 NMAC.

To avoid an enforcement action, you must submit the indicated information no later than 30 days after receipt of this notice.

30 days after receipt of this notice.	30-015-4 <b>56</b> 42
Test Allowable, New Well and Recompleted Well	30-015-45648 Amend C-104
<ul> <li>□ C-103 (or BLM equivalent) for all casing strings</li> <li>□ Spud Notice</li> <li>□ Surface Casing</li> <li>□ Intermediate Casing (if applicable)</li> <li>□ Additional Intermediate Casing (if applicable)</li> <li>□ Production Casing or Liner</li> </ul>	
☐ Applicable Order (NSL, NSP, Other)	
☐ Deviation Survey for Vertical Wells	
Directional Survey C-102 (As-Drilled Plat for Horizontal Well)	Amend on C-104 AND thecke-102
New Well and Recompleted Well Only	/ "
☐ C-103 Completion Sundry (or BLM equivalent)	
☐ C-105 Completion Report (or BLM equivalent)	
☐ All Logs Run on Well	

If you have any questions please contact the local OCD District Office

District I 1625 N. French Dr., Hobbs, NM 88240 District II 811 S. First St., Artesia, NM 88210

1000 Rio Brazos Rd., Aztec, NM 87410

District III

Date:

01/07/20

Phone: 713-497-2492

State of New Mexico Energy, Minerals & Natural Resources

RECEIVED

Form C-104 Revised August 1, 2011

SIAMit one 2000 to appropriate District Office

Oil Conservation Division 1220 South St. Francis Dr.

EMNRD-OCD ARTES MENDED REPORT

District IV Santa Fe, NM 87505 1220 S. St. Francis Dr., Santa Fe, NM 87505 REOUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT 1 Operator name and Address <sup>2</sup> OGRID Number OXY USA INC 16696 P.O. BOX 4294 HOUSTON, TX 77210 Reason for Filing Code/ Effective Date - NW <sup>4</sup> API Number <sup>5</sup> Pool Name Pool Code 30-015-45648 **INGLE WELLS; BONE SPRING** 33740 <sup>7</sup> Property Code: 324872 <sup>8</sup> Property Name: PURE GOLD MDP1 29-17 FEDERAL COM 9 Well Number: 4H II. 10 Surface Location Ul or lot no. Section Township Range | Lot Idn | Feet from the | North/South Line | Feet from the East/West line County 31E 430' SOUTH WEST **EDDY** 11 Bottom Hole Location FTP: 163' FSL 2179' FEL LTP: 2520' FSL 2258' FWL UL or lot no. Section Township Range | Lot Idn Feet from the North/South line Feet from the East/West line County (2613) 26 Z3 SOUTH 31E **EDDY** 17 12 Lse Code 13 Producing Method 15 C-129 Permit Number <sup>16</sup> C-129 Effective Date 4 Gas Connection <sup>17</sup> C-129 Expiration Date Date: 7/26/2019 III. Oil and Gas Transporters <sup>18</sup> Transporter <sup>19</sup> Transporter Name <sup>20</sup> O/G/W **OGRID** and Address 237722 CENTURION PIPELINE L.P. 0 151618 ENTERPRISE FIELD SERVICES LLC G IV. Well Completion Data <sup>21</sup> Spud Date <sup>22</sup> Ready Date <sup>23</sup> TD 24 PRTD <sup>25</sup> Perforations <sup>26</sup> DHC, MC 03/03/2019 07/21/2019 9861'V/22990'M 9861'V/22943'M 9966'-22900' <sup>28</sup> Casing & Tubing Size 29 Depth Set 27 Hole Size 30 Sacks Cement 17-1/2" 13-3/8" 670' 870 1335 12-1/4" 9-5/8" 4210' 8-1/2" 7-5/8" 9015' 606 6-3/4" 5-1/2" 22990' 1065 2-3/8" 10102' V. Well Test Data <sup>35</sup> Tbg. Pressure 31 Date New Oil 32 Gas Delivery Date 33 Test Date 34 Test Length <sup>36</sup> Csg. Pressure 24-HOUR 7/21/2019 7/7/2019 7/26/2019 834 38 Oil <sup>39</sup> Water 40 Gas 41 Test Method 37 Choke Size FLOWING : 128/128 3054 3491 DENIED

See Attached Cover Sheet <sup>42</sup> I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. Approved by: Signature: Printed name:/ Title: LESLIE REEVES Approval È Title: REGULATORY ADVISOR E-mail Address: LESLIE\_REEVES@oxy.com

## NM OIL CONSERVATION ARTESIA DISTRICT

Form 3160-4 (August 2007) UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

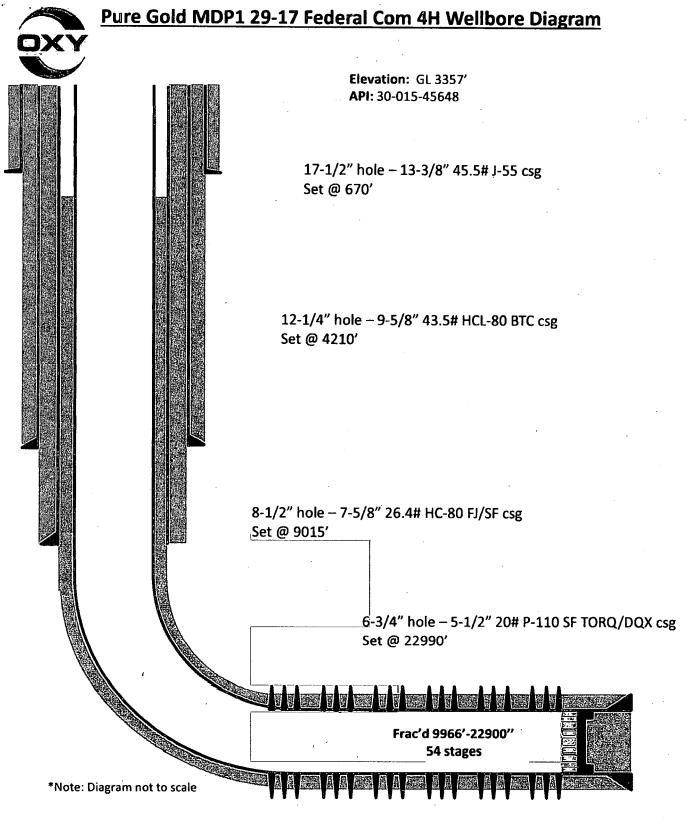
OCT 31 2019

FORM APPROVED OMB No. 1004-0137 Expires: July 31, 2010

WELL COMPLETION OR RECOMPLETION REPORT AND LOG										5. Lease Serial No.						
1a Tyme o	f Well 🔀	O Wall	<b>D</b> 6	W-11			3.04						_	MNM0545		
	of Completion	•	Gas lew Well	Well Well	nk Ov		Oth Deep		) Pluc	Back 🔲	Diff. R	Pamer .	6. If	Indian, All	ottee	or Tribe Name
,,	•	Othe							,	S Duck	J.11. I	COSVI.	7. U	nit or CA A	green	nent Name and No.
	ISA INC.		E	-Mail:	SARA	Contact:	SAF PMAI	RAH CHA N@OXY	PMA	N f			8. La	ase Name :	and W D MC	/ell No. DP1 29-17 FEDERAL C 41
3. Address	P.O. BOX		7210					3a. Pho Ph: 71	ne No	o. (include area	code)	)		PI Well No		
4. Location	n of Well (Re	port locati	on clearly a	nd in ac	corda	nce with I	Federa	ľ					10 8	ield and Do	ol or	30-015-45648 Exploratory
At surf	Sec 2	9 T23S R	31E Mer Ni 2605FWL	MP				-		,			1	IGLE WEI	LLS E	BONE SPRING
			Sec	29 T2:	3S R3	31E Mer	NMP			103.798340	1A/1	_	11. 5	Sec., T., R., r Area Se	M., o	r Block and Survey T23S R31E Mer NMP
	Sec	c 17 T23S	SR31F Mer	NMP							VV LOI	1	12. (	County or P		13. State
14. Date S		VOE 2023	FSL 2270F	_			103.			Completed			EDDY NM  17. Elevations (DF, KB, RT, GL)*			
03/03/2	2019√ 		05	05/22/2019 🗸						D & A Ready to Prod. 07/06/2019			3357 GL			
18. Total I	Depth:	MD TVD		22990 / 19. Plug Back T.D					MD 22943 20. De			20. Dep	pth Bridge Plug Set: MD TVD			
21. Type E GAMM	lectric & Oth	ner Mechai D LOG	nical Logs R	un (Sub	mit co	opy of ea	ch)		-	22.	Was Was	well cored		⊠ No ⊠ No	O Ye	es (Submit analysis) es (Submit analysis)
23 Casing a	nd Liner Rec	ord (Pana	ert all strings	ant in a	uall)						Direc	tional Su	rvey?	□ No	X Ye	es (Submit analysis)
		<u> </u>		sei in v	<del></del>	Bottor	, Ts	tage Cem	enter	No. of Sks	. &	Slurry	Vol			
Hole Size	Size/G	irade	Wt. (#/ft.)	(M	•	(MD)		Depth		Type of Cer		(BB		Cement 7	Гор*	Amount Pulled
6.750	<del>1</del> — — —	F TORQ	20.0			2299						5	257		8500	
17.500		375 J-55	45.5 43.5	<del>                                     </del>	0 0	<del></del>					870					<del> </del>
8.500	12.250 9.625 HCL-80 8.500 7.625 FJ/SF		43.5 26.4	<del> </del>	0						1335		398 180	<del></del>		<del>                                     </del>
								·-··					100			,
	Į .															
24. Tubing		4D) B:	ocker Denth	(MD)	ę:	- I	lanth (	C (A(D))	1.	hakaa Daash O	(D)	C'-	Τ,	4.5.00	<u>T</u>	P. L. P. d. 450
Size Depth Set (MD) Packer Depth (MD) Size Depth Set (MD) Packer Dep									acker Depth (r	VID)	Size	De	pth Set (MI	<del>"</del>	Packer Depth (MD)	
25. Produci	ing Intervals						26, P	erforation	Reco	ord						
	ormation		Тор		Во	ttom		Perforated Interval Size				Size	No. Holes Perf. Status			
A) BONE SPRING				9966		22900		9966 TO 22900			0.4	20	1350	ACT	IVE	
B) C)												+				
D)					-								$\top$			
	racture, Treat		nent Squeeze	, Etc.												
	Depth Interv		000 140871	D2GAL S	SI ICK	MATER	AND 2	2060226#		mount and Typ	e of N	faterial				<del></del>
	930	0 10 223	900 1400711	J. O. C.	JEION	WAI CAY	1110 2	.0808030#	SAN							
28 Product	tion - Interval	Δ														
Date First	Test	Hours	Test	Oil	- 1	Gas	Wa	ter	Oil Gr	avity	Gas		Producti	on Method		· · · · · · · · · · · · · · · · · · ·
Produced 07/21/2019	Date 07/26/2019	Tested 24	Production	BBL 3054		MCF 3491.0	BB			API	Gravity	iravity		FLOWS FROM WELL		
Choke	Tbg. Press.	Csg.	24 Hr.	Oil	1	Gas	Was	Vater Gas:Oi		Well Status		tātus	I LOVIO I ROIN WELL			
Size 128/128	Flwg. SI	Press. 834.0	Rate	BBL 305		MCF 3491	BBL Ratio			POW					-	
	tion - Interva	l	<u> </u>								<u> </u>					
Date First Produced	Test Date	Hours Tested	Test Production	Oil		Gas MCF	Wa		Oil Gr		Gas	,	Product	on Method		<del></del>
		1.000	Production BBL MCF BBL Corr. API Gravity				,									
Choke Size	Thg. Press. Flwg.	Csg. Press.	24 Hr. Rate	Oil BBL		Gas MCF	Wa:		Gas:O Ratio	il	Well S	tatus				
	Si								L		<u> </u>					

<sup>(</sup>See Instructions and spaces for additional data on reverse side)
ELECTRONIC SUBMISSION #490074 VERIFIED BY THE BLM WELL INFORMATION SYSTEM
\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\*

20k D	duction - Interv	-1 C												
Date First	Test	Hours	Test	Oil	Gas	Water .	Oil Gravity	T <sub>C</sub>	Gas Gas	Production Method				
Produced	Date	Tested	Production	BBL	MCF	BBL	Corr. API		ray Gravity	Production Method	٠			
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas;Oil Ratio	V	Vell Status					
28c. Proc	iuction - Interv	al D		<del></del>	<u> </u>				· <u>-</u>					
Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API		ins iravity	Production Method	V			
Choke Size	Tbg. Press. Flwg. Si	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BB1.	Gas:Oil Ratio	W	Vell Status	<del>!.</del>				
29. Dispe	osition of Gas(S	Sold, used	for fuel, vent	ed, etc.)	<del>•••••••••••••••••••••••••••••••••••••</del>		<u></u>							
30. Sumi	nary of Porous	Zones (In	clude Aquife	rs):					31. For	mation (Log) Markers				
tests,	all important a including deptiectoveries.	zones of p h interval	orosity and co tested, cushio	ontents there on used, time	eof: Cored i tool open,	ntervals and flowing an	d all drill-stem d shut-in press	ures		. •				
	Formation		Тор	Bottom		Descripti	ons, Contents,	Name	Top Meas. D					
BRUSHY BONE SF 1ST BON 2ND BON	CANYON	include p	4125 5052 6306 7989 8854 9703	5051 6305 7988 8853 9702 9900	OIL OIL OIL	, GAS, W. , GAS, W. , GAS, W. , GAS, W. , GAS, W.	ATER ATER ATER ATER ATER	AND WBI	SA CA DE BEI CH BRO	RUSTLER				
1. EI	e enclosed attac ectrical/Mechal andry Notice for	nical Logs	,			c Report	rt 3. DST Report 4. Directional Survey 7 Other:							
34. I here	by certify that	the forego	ing and attac	hed informa	tion is com	plete and co	orrect as detern	nined from	all available	records (see attached in	nstructions):			
		-			ission #490	074 Verifie	ed by the BLM ., sent to the (	Well Info			,			
Name	(please print)	SARAH	CHAPMAN				Title	REGUL	ATORY SPI	ECIALIST				
Signa	ture	(Electron	ic Submissi	on)	· · · · · · · · · · · · · · · · · · ·	Date 10/29/2019								
						,								
Title 18 U	J.S.C. Section ited States any	1001 and false, fict	Title 43 U.S.0 itious or fradu	C. Section 1 ulent statem	212, make i ents or repr	t a crime for esentations	or any person k as to any matte	nowingly a er within it	and willfully s jurisdiction	to make to any departm	ent or agency			



**PBTD** - 22943' MD **TD** - 22990' MD/9861' TVD