

Submit 3 Copies To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 87240
District II
811 South First, Artesia, NM 87210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

Form C-103
Revised March 25, 1999

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- 30903
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator OXY USA Inc.		6. State Oil & Gas Lease No. E537
3. Address of Operator P.O. BOX 50250 MIDLAND, TX 79710-0250		7. Lease Name or Unit Agreement Name: Oxy Bay State
4. Well Location SL Unit Letter O : 440 feet from the South line and 1980 feet from the East line BHL 0 : 710 feet from the South line and 1930 feet from the East line Section 33 Township 17S Range 29E NMPM EDDY County		8. Well No. 2
10. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. Pool name or Wildcat Unders. Grayburg Morrow

11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☒
PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐

OTHER: Amend Intermediate Casing ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐

OTHER: ☐

12. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Per NMOCD request, OXY proposes to change the intermediate casing program as follows:

CASING: Intermediate: 8-5/8" OD 32# K55 ST&C new casing from 0-4350'

CEMENT: Intermediate - Circulate cement with 840sx 35:65 POZ/C with 6% Bentonite + 2% CaCl₂ + .25#/sx Cello-Seal followed by 165sx C1 C with 2% CaCl₂.

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

SIGNATURE David Stewart TITLE REGULATORY ANALYST DATE 11/2/00

Type or print name DAVID STEWART Telephone No. 915-685-5717

(This space for State use) Jim W. Green District Supervisor
APPROVED BY Jim W. Green TITLE District Supervisor DATE 1-26-00
Conditions of approval, if any: