

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

WELL API NO. 30-015-30993

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
V-4808-1

7. Lease Name or Unit Agreement Name:
Oxy Big Boss State
25424

8. Well No. 1

9. Pool name or Wildcat
Unders. Avalon Morrow

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

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. 16696

3. Address of Operator
P.O. BOX 50250 MIDLAND, TX 79710-0250

4. Well Location
Unit Letter H : 1500 feet from the North line and 660 feet from the East line
Section 21 Township 20S Range 27E NMPM EDDY County

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

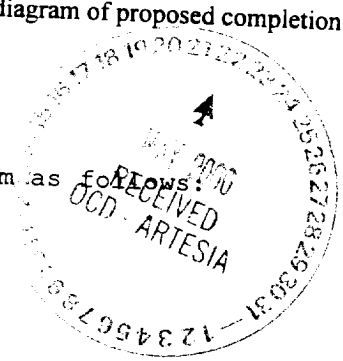
NOTICE OF INTENTION TO:
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☒
PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐
OTHER: ☐

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 recompilation.

OXY USA Inc. requests to amend the Blowout Preventer Program as follows:

BOP PROGRAM: 0'-400' None
400'-3000' 13-3/8" 3M annular preventer.
3000'-11000' 11" 5M blind pipe rams with 5M annular preventer and rotating head below 7500'.



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 5/19/00

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

(This space for State use)

APPROVED BY Jim W. Green TITLE SUPERVISOR, DISTRICT II DATE MAY 23 2000

Conditions of approval, if any: