

District I  
P.O. Box 1980, Hobbs, NM 88241-1980  
District II  
PO Drawer DD, Artesia, NM 88211-0719  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico  
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION  
PO Box 2088  
Santa Fe, NM 87504-2088

Form C-101  
Revised February 10, 1994  
Instructions on back  
Submit to Appropriate District Office  
State Lease - 6 Copies  
Fee Lease - 5 Copies

☐ AMENDED REPORT

APPLICATION FOR PERMIT TO DRILL, RE-ENTER, DEEPEN, PLUGBACK, OR ADD A ZONE

<sup>1</sup> Operator Name and Address. OXY USA Inc. P.O. Box 50250 Midland, TX 79710		<sup>1</sup> OGRID Number 16696
		<sup>1</sup> API Number 30-015-23485
<sup>2</sup> Property Code 17055	<sup>2</sup> Property Name Rodgers	<sup>2</sup> Well No. 1

<sup>7</sup> Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
P	30	22S	27E		330	South	860	East	Eddy

<sup>8</sup> Proposed Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
<sup>9</sup> Proposed Pool 1 Wildcat Group 4					<sup>10</sup> Proposed Pool 2				

<sup>11</sup> Work Type Code Drill	<sup>12</sup> Well Type Code Oil	<sup>13</sup> Cable/Rotary Rotary	<sup>14</sup> Lease Type Code Fee	<sup>15</sup> Ground Level Elevation 3174'
<sup>16</sup> Multiple Single	<sup>17</sup> Proposed Depth 7100'	<sup>18</sup> Formation Bone Springs	<sup>19</sup> Contractor N/A	<sup>20</sup> Spud Date ASAP

<sup>21</sup> Proposed Casing and Cement Program

Hole Size	Casing Size	Casing weight/foot	Setting Depth	Sacks of Cement	Estimated TOC
17 1/2"	13 3/8"	48#	400'	500	Surface
11"	8 5/8"	24-32#	3000'	840	Surface
7 7/8"	5 1/2"	15.5-17#	7100'	450	2500'

<sup>22</sup> Describe the proposed program. If this application is to DEEPEN or PLUG BACK give the data on the present productive zone and proposed new productive zone. Describe the blowout prevention program, if any. Use additional sheets if necessary.

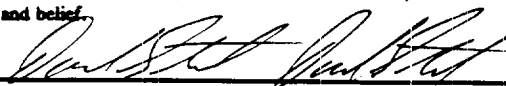
SEE OTHER SIDE

Application Expired

RECEIVED  
Post ID 1  
5-5-95

APR 29 1995

OIL CON. DIV.  
DIST. I

<sup>23</sup> I hereby certify that the information given above is true and complete to the best of my knowledge and belief. Signature: 		<b>OIL CONSERVATION DIVISION</b>	
Printed name: David Stewart		Approved by: ORIGINAL SIGNED BY TIM W. GUM	
Title: Regulatory Analyst		Title: DISTRICT II SUPERVISOR	
Date: 3/30/95		Approval Date: APR 27 1995	Expiration Date: 10-27-95
Phone: 915-685-5717		Conditions of Approval: Attached <input type="checkbox"/>	

Optional: 5M wellhead equipment may be substituted depending on availability.