

Submit 1 Copy To Appropriate District Office
 District I – (575) 393-6161
 1625 N. French Dr., Hobbs, NM 88240
 District II – (575) 748-1283
 811 S. First St., Artesia, NM 88210
 District III – (505) 334-6178
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV – (505) 476-3460
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised July 18, 2013

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

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. 30-021-20540
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other : SWD		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator OXY USA INC		6. State Oil & Gas Lease No.
3. Address of Operator PO BOX 303, AMISTAD , NM 88410		7. Lease Name or Unit Agreement Name WEST BRAVO DOME UNIT
4. Well Location Unit Letter <u>F</u> : <u>1650</u> feet from the <u>NORTH</u> line and <u>1650</u> feet from the <u>WEST</u> line Section <u>27</u> Township <u>18N</u> Range <u>30E</u> NMPM County <u>HARDING</u>		8. Well Number 271 (SWD)
11. Elevation (Show whether DR, RKB, RT, GR, etc.) GL: 4333'		9. OGRID Number 16696
10. Pool name or Wildcat WEST BRAVO DOME CO2 GAS		

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

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: <input type="checkbox"/>		SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: MECHANICAL INTEGRITY TEST <input checked="" type="checkbox"/>	
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13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

DATE PERFORMED 3/13/2019.

- 9:00 safety meeting and JSA's
- 10:00 meet and lead Gravity pump truck to location
- 11:00 Rig up pump truck
- 11:30 Load well, took less than 1/10 of a bbl to load, put 550 psi on casing, and start test.
- 12:00 remove chart and depressurize well.
- 12:30 Rig down pump truck and release.
- 13:00 leave location

Test required w/o truck. MK

SEE ENCLOSED COPY OF PRESSURE RECORDER CHART

Spud Date: Rig Release Date:

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

SIGNATURE  TITLE SENIOR ENGINEERING ADVISOR DATE 3/18/2019

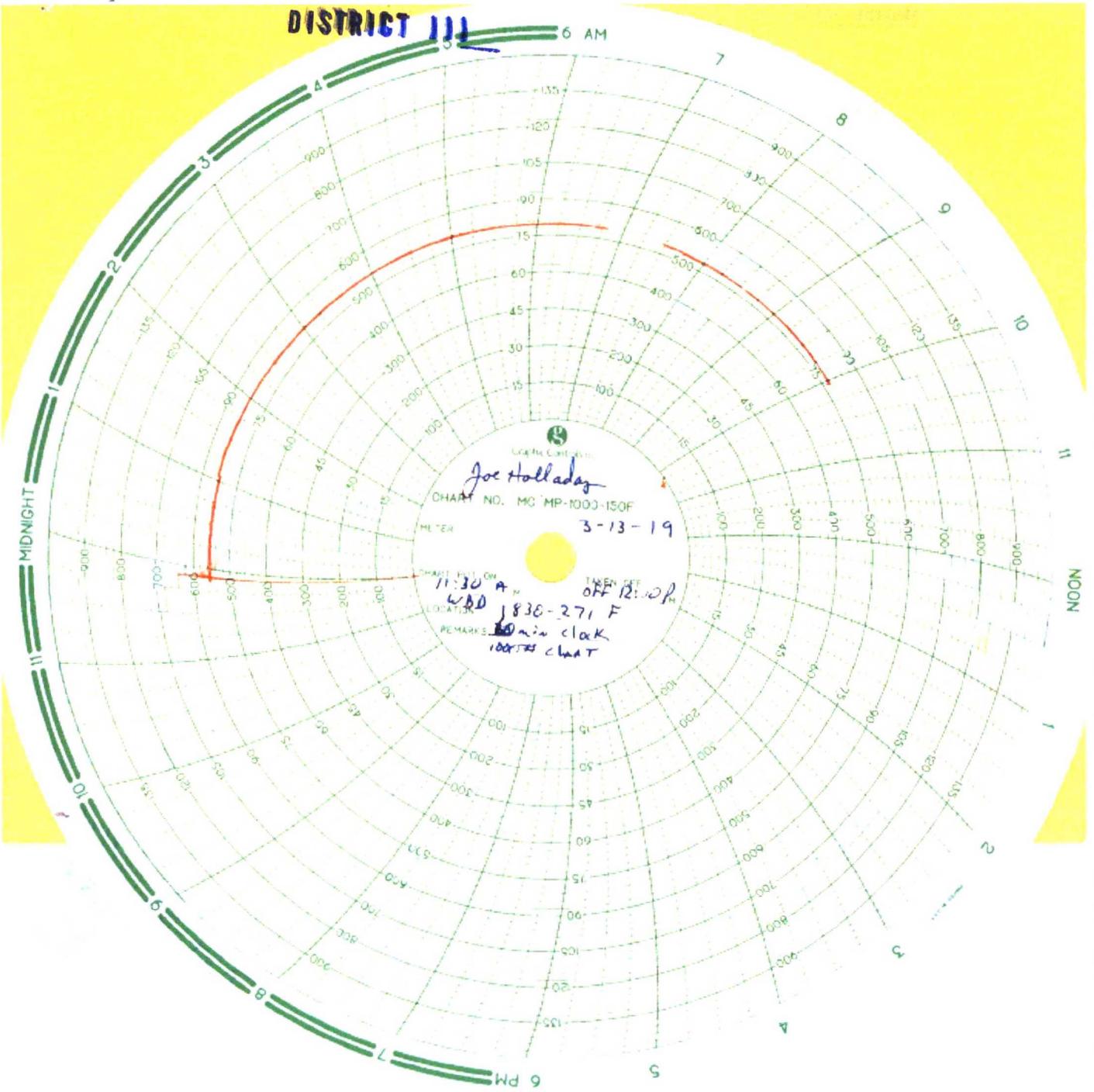
Type or print name AL GIUSSANI E-mail address: ALBERT_GIUSSANI@OXY.COM PHONE: 806-638-1296

For State Use Only
 APPROVED BY: **ACCEPTED FOR RECORD** TITLE _____ DATE _____
 Conditions of Approval (if any): _____

NMOCD

DEC 03 2019

DISTRICT III



Kuehling, Monica, EMNRD

From: Giussani, Alberto P <Albert_Giussani@oxy.com>
Sent: Monday, March 18, 2019 10:39 AM
To: Jones, William V, EMNRD
Subject: MIT FOR WBDU 18 30 27 1 F 30 021 20540
Attachments: MIT FOR WBDU 18 30 27 1 F 30 021 20540.doc

Mr. Jones,

We went ahead and got this MIT since after reviewing all the submitted info on this well I had some doubts on what would have been the last MIT actually submitted.

Please let me know if we are in full compliance now. As per the re-perforating I am working with regulatory to submit a new c-108.

Thank you