

District I
1625 N. French Dr., Hobbs, NM 88240
Phone:(575) 393-6161 Fax:(575) 393-0720
District II
811 S. First St., Artesia, NM 88210
Phone:(575) 748-1283 Fax:(575) 748-9720
District III
1000 Rio Brazos Rd., Aztec, NM 87410
Phone:(505) 334-6178 Fax:(505) 334-6170
District IV
1220 S. St Francis Dr., Santa Fe, NM 87505
Phone:(505) 476-3470 Fax:(505) 476-3462

State of New Mexico
Energy, Minerals and Natural
Resources
Oil Conservation Division
1220 S. St Francis Dr.
Santa Fe, NM 87505

Form C-103
August 1, 2011
Permit 153033

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVIOR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		WELL API NUMBER 30-015-39849
1. Type of Well: O		5. Indicate Type of Lease P
2. Name of Operator OXY USA INC		6. State Oil & Gas Lease No.
3. Address of Operator PO Box 4294, Houston, TX 77210		7. Lease Name or Unit Agreement Name ROGERS
4. Well Location Unit Letter <u>H</u> : <u>1650</u> feet from the <u>N</u> line and <u>990</u> feet from the <u>E</u> line Section <u>23</u> Township <u>18S</u> Range <u>26E</u> NMPM <u>Eddy</u> County		8. Well Number 003
11. Elevation (Show whether DR, KB, BT, GR, etc.) 3310 GR		9. OGRID Number 16696
Pit or Below-grade Tank Application ☐ or Closure ☐		10. Pool name or Wildcat
Pit Type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____ Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____		

12. 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 OF PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
Other:

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTER CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDON ☐
CASING/CEMENT JOB ☐
Other: **Drilling/Cement** ☒

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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

06/07/2012: SPUD WELL AND BEGIN DRILLING 12 1/4" SURFACE HOLE.

06/08/2012: TD 12 1/4" HOLE @ 900'. Ran 9 5/8" Surface to 900'.

06/09/2012: PUMPED 590SX OF THIXOTROPIC CEMENT. DID NOT CIRCULATE CEMENT TO SURFACE. NOTIFIED NMOCD. RAN TEMP SURVEY. TOC @ 150'. PREFORMED 1" CEMENT JOB. PUMPED 150 SX AND CIRCULATED 42SX TO SURFACE. TOC NOW @ SURFACE.

06/10/2012: TESTED SURFACE CSING TO 886 PSI FOR 30 MINUTES. TEST GOOD. BEGAN DRILLING 7 7/8" PRODUCTION HOLE.

06/12/2012: TD WELL @ 3722'.

06/13/2012: RAN TRIPLE COMBO OPEN HOLE LOGS. RAN 5 1/2" PRODUCTION CASING.CEMENT WITH 640SX WITH 107 SX C16/7/2012 Spudded well.

Casing and Cement Program

Date	String	Fluid Type	Hole Size	Csg Size	Weight lb/ft	Grade	Est TOC	Dpth Set	Sacks	Yield	Class	1" Dpth	Pres Held	Pres Drop	Open Hole
06/08/12	Surf	FreshWater	12.25	9.625	36	J55	150	900	590	1.67	THIXOTROPI		886		0
06/08/12	Surf	FreshWater	12.25	9.625	36	J55	0	900	150	1.34	C	150	886		0
06/13/12	Prod	Brine	7.875	5.5	17	L80	0	3722	640	1.89	C		5000		0

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Electronically Signed _____ TITLE _____ DATE 8/3/2012
Type or print name KAREN M SINARD E-mail address karen_sinard@oxy.com Telephone No. 713-366-5485

For State Use Only:

APPROVED BY: Randy Dade TITLE District Supervisor DATE 8/6/2012 10:29:37 AM