

District I
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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-101
August 1, 2011
Permit 160186

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

1. Operator Name and Address OXY USA WTP LIMITED PARTNERSHIP PO Box 4294 Houston, TX 77210		2. OGRID Number 192463
		3. API Number 30-015-40940
4. Property Code 309604	5. Property Name TIGGER 9 STATE	6. Well No. 009

7. Surface Location

UL - Lot	Section	Township	Range	Lot Idn	Feet From	N/S Line	Feet From	E/W Line	County
P	9	17S	29E	P	420	S	620	E	EDDY

8. Proposed Bottom Hole Location

UL - Lot	Section	Township	Range	Lot Idn	Feet From	N/S Line	Feet From	E/W Line	County
A	9	17S	29E	P	420	S	620	E	Eddy

9. Pool Information

EMPIRE; GLORIETA-YESO, EAST	96610
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Additional Well Information

11. Work Type New Well	12. Well Type OIL	13. Cable/Rotary	14. Lease Type State	15. Ground Level Elevation 3565
16. Multiple N	17. Proposed Depth 5300	18. Formation Yeso Formation	19. Contractor	20. Spud Date 6/24/2012
Depth to Ground water		Distance from nearest fresh water well		Distance to nearest surface water

21. Proposed Casing and Cement Program

Type	Hole Size	Casing Type	Casing Weight/ft	Setting Depth	Sacks of Cement	Estimated TOC
Surf	14.75	11.75	42	450	450	0
Int1	10.625	8.625	32	1100	310	0
Prod	7.875	5.5	17	5300	1420	0

Casing/Cement Program: Additional Comments

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22. Proposed Blowout Prevention Program

Type	Working Pressure	Test Pressure	Manufacturer
Annular	3000	2100	Cameron
DoubleRam	3000	3000	Cameron

23. I hereby certify that the information given above is true and complete to the best of my knowledge and belief. I further certify I have complied with 19.15.14.9 (A) NMAC <input checked="" type="checkbox"/> and/or 19.15.14.9 (B) NMAC <input checked="" type="checkbox"/> if applicable. Signature:	OIL CONSERVATION DIVISION Approved By: Randy Dade	
Printed Name: Electronically filed by KAREN M SINARD	Title: District Supervisor	
Title:	Approved Date: 1/7/2013	Expiration Date: 1/7/2015
Email Address: karen_sinard@oxy.com		
Date: 1/4/2013	Phone: 713-366-5485	Conditions of Approval Attached

Form C-102
Revised August 1, 2011
Submit one copy to appropriate
District Office

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number	Pool Code	Pool Name
Property Code 309604	96010	Empire, Glacietta Pass, East
GRID No. 192463	Property Name TIGGER "9" STATE	Well Number 9
	Operator Name OXY USA WTP LP	Elevation 3564.7'

UL or lot no.	Section	Range	Lot Idn	Feet from the North South line	Feet from the East West line	County
P	9	17 SOUTH	29 EAST. N.M.P.M.	420' SOUTH	620' EAST	EDDY

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
Dedicated Acres	Joint or In/In	Consolidation Code	Order No.				

40

No allowance will be assigned to this acreage until it is sold.

No allowable will be assigned to this completion unit if all interests have been consolidated or a non-standard unit has been approved by the division.


OPERATOR CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief; and that the organization either owns a working interest or undivided mineral interest in the land including the proposed known hole location or has a right to drill this well at the locality pursuant to a contract with an owner of such a mineral or working interests; or to a voluntary pooling agreement or a compulsory pooling order.

Signature of the operator _____
Date Jan 13 2012
State TX
Firm Name Sentier Drilling
Firm Address _____
Phone Number _____
Fax Number _____

SURVEYOR CERTIFICATION

I hereby certify that I am duly licensed as a surveyor on this state and have personally surveyed the above described lands and know the contents hereof to be true and correct to the best of my belief.

Date of Survey Dec 1st 10, 2012
Surveyor's License No. 15079


Signature and Title of Surveyor _____
Professional Status _____

Certificate Number 15079

SURFACE LOCATION
NEW MO DIST
NAD 1927
X = 670455.9
Y = 670455.9
LAT.: N 32.8428973°
LONG.: W 104.0727838°

620'
420'

W04 12081 OWM-d (M)

Permit Comments

Operator: OXY USA WTP LIMITED PARTNERSHIP , 192463

Well: TIGGER 9 STATE #009

API: 30-015-40940

Created By	Comment	Comment Date
CSHAPARD	Land s/S	1/7/2013

Permit Conditions of Approval

Operator: OXY USA WTP LIMITED PARTNERSHIP , 192463

Well: TIGGER 9 STATE #009

API: 30-015-40940

OCD Reviewer	Condition
CSHAPARD	Once the well is spud, to prevent ground water contamination through whole or partial conduits from the surface, the operator shall drill without interruption through the fresh water zone or zones and shall immediately set in cement the water protection string