

Submit 1 Copy To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
October 13, 2009

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

WELL API NO. 30-021-20505
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name WEST BRAVO DOME UNIT (319259)
8. Well Number 181
9. OGRID Number 16696
10. Pool name or Wildcat WEST BRAVO DOME CARBON DIOXIDE GAS (96387)

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 **CO₂ PRODUCING WELL**

2. Name of Operator
OXY USA Inc.

3. Address of Operator
P.O. Box 303, AMISTAD, NM 88410

4. Well Location
Unit Letter **F**: **2210** feet from the **NORTH** line and **1650** feet from the **WEST** line
Section **18** Township **19N** Range **30E** NMPM **HARDING** County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
GL: 4479'

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 PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
DOWNHOLE COMMINGLE ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐

OTHER: ☐

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.

WELL IS A TUBINGLESS COMPLETION WITH 4 1/2" FG PRODUCTION CASING FROM THE TUBB FORMATION TO SURFACE
SEE ENCLOSED CORRECTED WELLBORE DIAGRAM (INFO ON COMPLETION FORM INCORRECT)
ALSO ENCLOSED ORIGINAL REQUEST FOR TUBINGLESS COMPLETION

REQUEST TO TA THE WELL AS IS AND KEEP IT AS AN OBSERVATION WELL GIVEN ITS LOCATION ON THE NORTHERN EDGE OF THE WEST BRAVO DOME UNIT AND ITS VALUES AS TO RESERVOIR PRESSURE CHANGES. PRESSURES WILL BE REPORTED ON AN ANNUAL BASIS.

Spud Date:

4/15/2010

Rig Release Date:

TA UNTIL
10/11/19

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

SIGNATURE  TITLE: SR ENG ADVISOR DATE 10/09/2018

Type or print name AL GIUSSANI E-mail address: albert_giussani@oxy.com PHONE: 806-638-1296

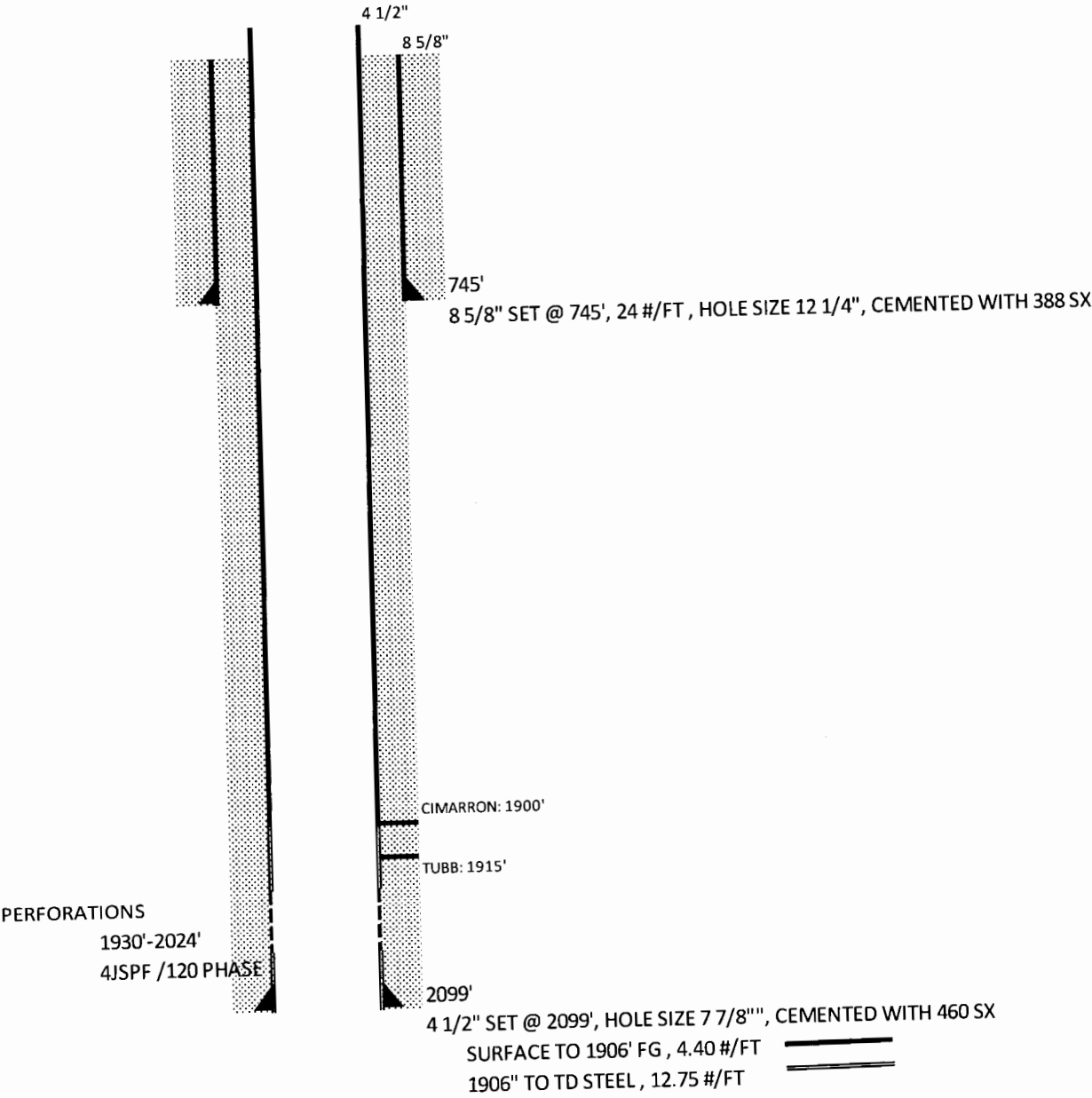
For State Use Only

APPROVED BY:  TITLE: Engineer DATE 10/15/18

Conditions of Approval (if any):

FIELD: WEST BRAVO DOME UNIT
WELL: 19 30 18 1 F
API: 30-021-20505

WELL: 19 30 18 1 K
API 30-021-20505



ORIGINAL REQUEST FOR TUBINGLESS COMPLETION:

Submit 1 Copy To Appropriate District Office
 District I
 1623 N. French Dr., Hobbs, NM 88240
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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. 30-021-20505
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other CO2 SUPPLY		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator HESS Corporation		6. State Oil & Gas Lease No.
3. Address of Operator PO Box 840 Seminole TX 79360		7. Lease Name or Unit Agreement Name Mitchell
4. Well Location Unit Letter F : 2210 feet from the NORTH line and 1650 feet from the WEST line Section 18 Township 19N Range 30E NMPM County HARDING		8. Well Number 181F 9. OGRID Number 495
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4479'		10. Pool name or Wildcat (96387) 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 ☐ PLUG AND ABANDON ☐
 TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
 PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
 DOWNHOLE COMMINGLE ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
 COMMENCE DRILLING OPNS. ☐ P AND A ☐
 CASING/CEMENT JOB ☐

OTHER: Request Approval Tubingless Completion ☒OTHER: ☐

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.

Requesting approval for the tubingless completion.

This well will have fiberglass casing from surface to the productive interval (GRANITE WASH).

Steel casing will be used across the GRANITE WASH.

The fiberglass casing must penetrate the Cimarron at a minimum.

The optimum point for the setting the fiberglass casing is at the midpoint of the GRANITE WASH formation.

Proposed Completion:

MIRU on well.

Swab well

TIH and perf 4.5" csg

RD

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 Rita C. Smith TITLE ENGINEERING TECH DATE 1/12/2010

Type or print name RITA C. SMITH E-mail address: rsmith@hess.com PHONE: 432-758-6726
 For State Use Only

APPROVED BY: Ed Martin TITLE DISTRICT SUPERVISOR DATE 1/21/10

Conditions of Approval (if any):