

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

WELL API NO. 30-025-45959
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name AVOGATO 30 31 STATE COM
8. Well Number 14H
9. OGRID Number 16696
10. Pool name or Wildcat RED TANK; BONE SPRING, EAST

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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator OXY USA INC.	
3. Address of Operator PO BOX 4294, HOUSTON, TX 77210	
4. Well Location Unit Letter <u>B</u> : <u>160</u> feet from the <u>NORTH</u> line and <u>2340</u> feet from the <u>EAST</u> line Section <u>30</u> Township <u>22S</u> Range <u>33E</u> NMPM County <u>LEA</u>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3692' GL	

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: CLGC STORAGE <input checked="" 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: <input 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.
 PER ORDER R-22101-

- A. RESULTS OF THE RECENT MIT ARE ATTACHED.
 B. A CBL IS ON RECORD WITH THE OCD DEMONSTRATING PLACEMENT OF CEMENT AND CEMENT BOND OF THE PRODUCTION CASING AND THE TIE-IN OF THE PRODUCTION CASING WITH THE NEXT PRIOR CASING.
 C. EQUIPMENT IS INSTALLED TO LIMIT THE INJECTION PRESSURE TO LESS THAN OR EQUAL TO THE MASP.
 D. THE EQUIPMENT TO MONITOR THE CASING ANNULUS PRESSURE(S) AND INJECTION RATE IS INSTALLED.

OXY WILL PLACE THIS CLGC WELL INTO SERVICE IN 48 HOURS AND IT WILL BE READY FOR INJECTION.

Spud Date:

Rig Release Date:

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

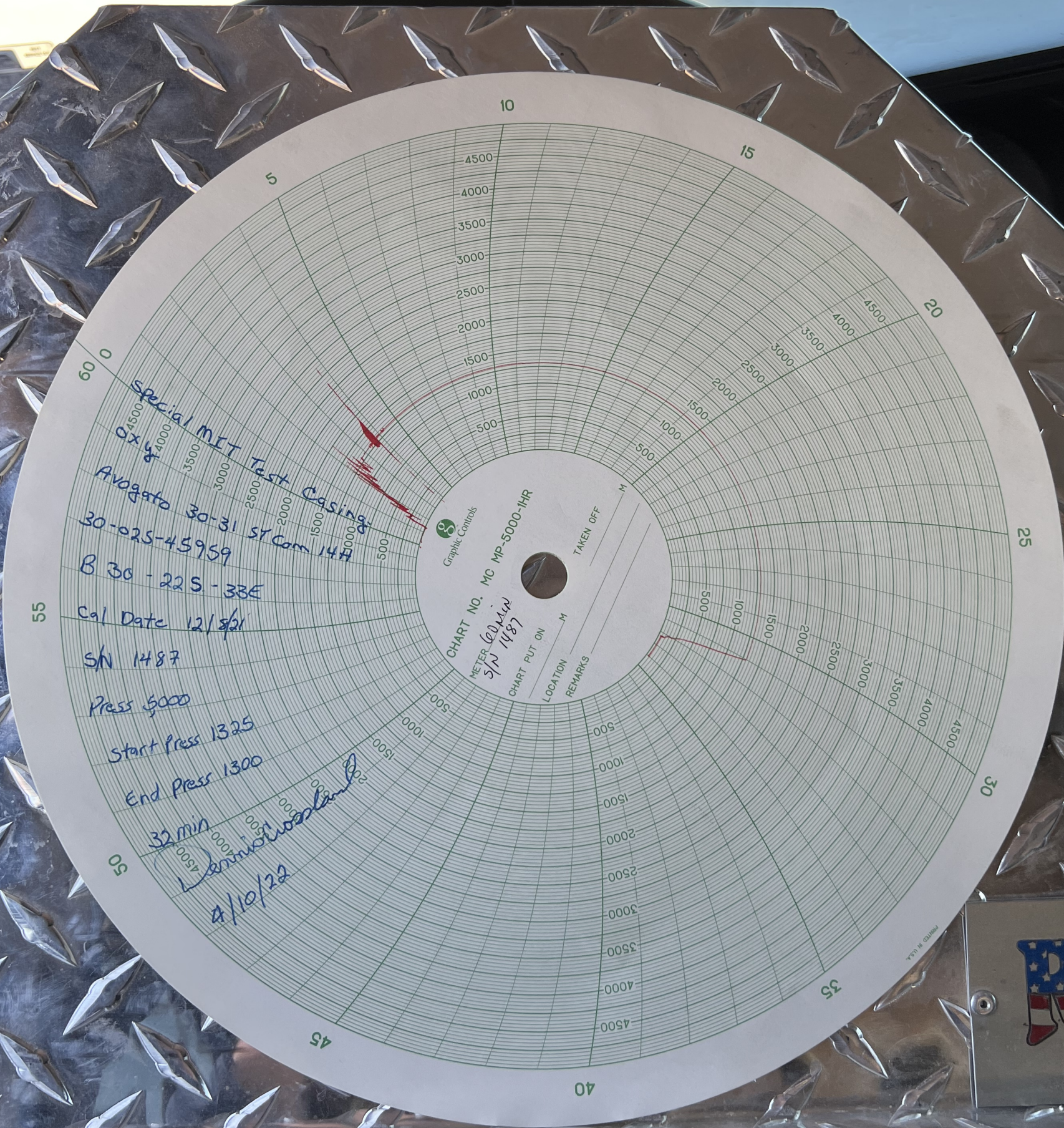
SIGNATURE Stephen Janacek TITLE REGULATORY ENGINEER DATE 5/5/22

Type or print name STEPHEN JANACEK E-mail address: STEPHEN_JANACEK@OXY.COM PHONE: 713-493-1986

For State Use Only

APPROVED BY: Dean R McClure TITLE Petroleum Engineer DATE 05/06/2022

Conditions of Approval (if any):



District I
1625 N French Dr., Hobbs, NM 88240
Phone: (575) 393-6151 Fax: (575) 393-0720

State of New Mexico
Energy, Minerals and Natural Resources Department
Oil Conservation Division Hobbs District Office

BRADENHEAD TEST REPORT

Operator Name OXY	API Number 30-025-45959
Property Name AVAGATO 30 ST Com	Well No. #14H

2. Surface Location

UL - Lot B	Section 30	Township 22S	Range 33E	Feet from 160	N/S Line N	Feet from 2340	E/W Line E	County LEA
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Well Status

TA'D WELL YES <input type="radio"/> NO <input checked="" type="radio"/>	SHUT-IN NO <input type="radio"/> YES <input checked="" type="radio"/>	INJECTOR INJ <input type="radio"/> SWD <input type="radio"/>	PRODUCER OIL <input checked="" type="radio"/> GAS <input type="radio"/>	DATE
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<input type="radio"/>	<input type="radio"/>			
Flow Characteristics					
Puff	Y / <input checked="" type="radio"/> N	Y / <input checked="" type="radio"/> N	Y / <input checked="" type="radio"/> N	Y / <input checked="" type="radio"/> N	CO2
Steady Flow	Y / <input checked="" type="radio"/> N	Y / <input checked="" type="radio"/> N	Y / <input checked="" type="radio"/> N	Y / <input checked="" type="radio"/> N	WTR
Surges	Y / <input checked="" type="radio"/> N	Y / <input checked="" type="radio"/> N	Y / <input checked="" type="radio"/> N	Y / <input checked="" type="radio"/> N	GAS
Down to nothing	<input checked="" type="radio"/> Y / N	<input checked="" type="radio"/> Y / N	Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / N	Type of Fluid
Gas or Oil	Y / <input checked="" type="radio"/> N	Y / <input checked="" type="radio"/> N	Y / <input checked="" type="radio"/> N	Y / <input checked="" type="radio"/> N	Isjected for
Water	Y / <input checked="" type="radio"/> N	Y / <input checked="" type="radio"/> N	Y / <input checked="" type="radio"/> N	Y / <input checked="" type="radio"/> N	Waterflood if
					applies

Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

Signature: Dennis Crossland 4/10/22	OIL CONSERVATION DIVISION
Printed name: Dennis Crossland	Entered into RBDMS
Title: WOCIS	Re-test AR
E-mail Address:	
Date:	
Phone: 580 290-0660	
Witness:	

INSTRUCTIONS ON BACK OF THIS FORM

District I
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Oil Conservation Division
1220 S. St Francis Dr.
Santa Fe, NM 87505

CONDITIONS

Action 104689

CONDITIONS

Operator: OXY USA INC P.O. Box 4294 Houston, TX 772104294	OGRID: 16696
	Action Number: 104689
	Action Type: [C-103] NOI General Sundry (C-103X)

CONDITIONS

Created By	Condition	Condition Date
dmcclure	None	5/6/2022