

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. 30-021-20540
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name WEST BRAVO DOME SWD
8. Well Number #271
9. OGRID Number 16696
10. Pool name or Wildcat WEST BRAVO DOME CO2 GAS

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 type="checkbox"/> Gas Well <input type="checkbox"/> Other <input checked="" type="checkbox"/>	
2. Name of Operator OXY USA INC.	
3. Address of Operator 5 GREENWAY PLAZA SUITE 110, HOUSTON, TX	
4. Well Location Unit Letter F : 1650 feet from the NORTH line and 1650 feet from the WEST line Section 27 Township 18N Range 30E NMPM County HARDING	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4333'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: <input type="checkbox"/>		SUBSEQUENT REPORT OF: REMEDIAL WORK <input checked="" 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.

4/7/23 MIRU.

4/11/23 WAITED ON OCD PAPERWORK TO BE APPROVED.

4/12/23 RIH WITH WIRELINE AND TAGGED @ 1562'. POOH WITH BLANKING PLUG, PKR AND 2-7/8" TUBING. RIH AND SET PKR @ 1562'. SET BLANKING PLUG ON WIRELINE. TESTED TUBING. UNJAYED OFF PKR. CIRC WELL. LATCHED BACK INTO PKR.

4/13/23 0 PRESSURES. ND BOP, BU WH. SET PKR. POOH W/ BLANKING PLUG. PERFORMED PASSING MIT TEST, NMOCD WITNESSED. RDMO.

SEE THE ATTACHED MIT CHART AND UPDATED WBD FOR REFERENCE. STEP RATE TEST NOI C-103 TO FOLLOW.

Spud Date:

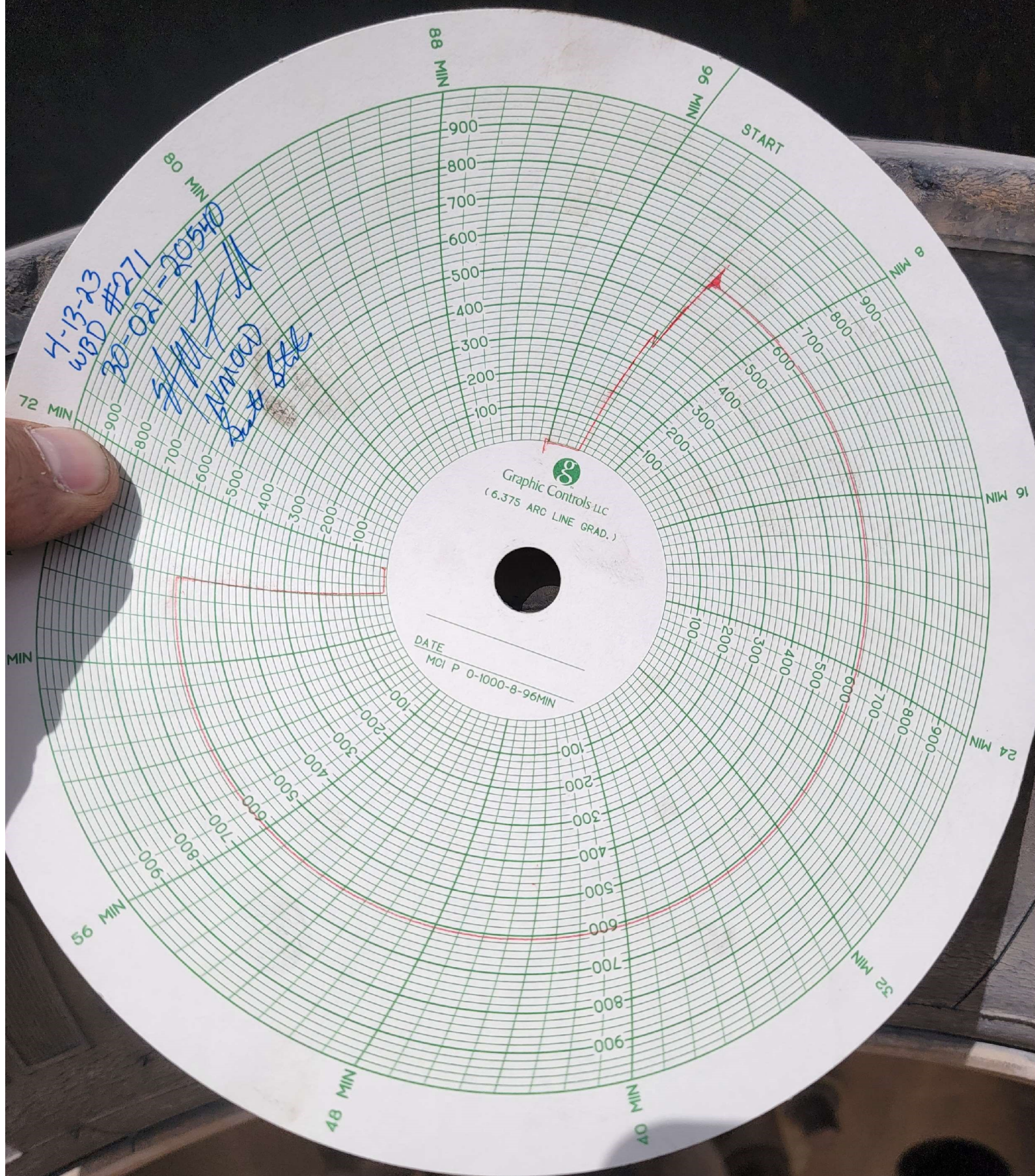
Rig Release Date:

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

SIGNATURE Leslie T. Reeves TITLE REGULATORY MANAGER DATE 4/14/2023

Type or print name LESLIE REEVES E-mail address: LESLIE_REEVES@OXY.COM PHONE: 713-497-2492
For State Use Only

APPROVED BY: _____ TITLE _____ DATE _____
 Conditions of Approval (if any): _____





NEW MEXICO ENERGY, MINERALS and NATURAL RESOURCES DEPARTMENT

MECHANICAL INTEGRITY TEST REPORT (TA OR UIC)

Date of Test 4-13-23 Operator OXY USA INC API # 30-0 21-20540

Property Name WBD Well # 271 Location: Unit F Sec 27 Twn 18N Rge 30E

Land Type:

State _____
Federal _____
Private X _____
Indian _____

Well Type:

Water Injection _____
Salt Water Disposal X _____
Gas Injection _____
Producing Oil/Gas _____
Pressure observation _____

Temporarily Abandoned Well (Y/N): NO TA Expires: NA
Max. Inj. Pres. 320

Casing Pres. 0
Bradenhead Pres. 0
Tubing Pres. 217
Int. Casing Pres. _____

Tbg. SI Pres. _____
Tbg. Inj. Pres. _____

Pressured annulus up to 620 psi. for 40 mins. Test passed/failed

REMARKS: slight pressure drop at the start, well held for the rest of the test.

By [Signature]
(Operator Representative)

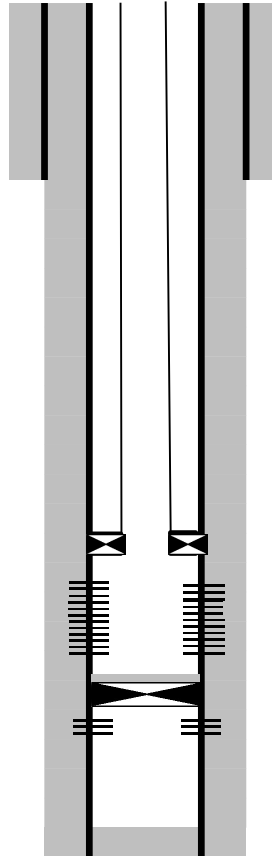
Witness [Signature]
(NMOCD)

WOC
(Position)

Revised 02-11-02

OXY USA Inc. - Current
West Bravo Dome Unit SWD #271
API No. 30-021-20540

2-7/8" TK internally coated tubing
Arrowset Packer set @ +/- 1563'
Perfs @ 1600' - 1900'



Spud 07/06/2012

12-1/4" hole @ 776'
8-5/8"24# csg @ 776'
w/ 415sx-TOC-Surf-Circ.

7-7/8" hole @ 2221' MD
5-1/2" 15.5# csg @ 2221'
w/ 332sx - TOC-Surf-Circ.

CIBP Set @ 1970' w/ 20' cement
Perfs 2004' - 2115'

PBTD - 2221'

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Santa Fe, NM 87505

CONDITIONS

Action 207990

CONDITIONS

Operator: OXY USA INC P.O. Box 4294 Houston, TX 772104294	OGRID: 16696
	Action Number: 207990
	Action Type: [C-103] Sub. Workover (C-103R)

CONDITIONS

Created By	Condition	Condition Date
mgebremichael	None	10/10/2023