Submit 1 Copy To Appropriate District 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

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

Form C-103
Revised July 18, 2013

WELL API NO. 30-015-44633

5. Indicate Type of Lease STATE ☐ FEE ☐

6. State Oil & Gas Lease No.

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.)

7. Lease Name or Unit Agreement Name: CORRAL CANYON 36-25 FEDERAL COM

1. Type of Well: Oil Well ☑ Gas Well ☐ Other

8. Well Number #023H

2. Name of Operator: OXY USA INC.

9. OGRID Number: 16696

3. Address of Operator: PO BOX 4294, HOUSTON, TX 77210

10. Pool name or Wildcat: [96473] PIERCE CROSSING; BONE SPRING, EAST

4. Well Location
Unit Letter C : 381 feet from the NORTH line and 1563 feet from the WEST line
Section 1 Township 25S Range 29E NMPM County EDDY

11. Elevation *(Show whether DR, RKB, RT, GR, etc.)*

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK	☐	PLUG AND ABANDON	☐	REMEDIAL WORK	☐	ALTERING CASING	☐
TEMPORARILY ABANDON	☐	CHANGE PLANS	☐	COMMENCE DRILLING OPNS.	☐	P AND A	☐
PULL OR ALTER CASING	☐	MULTIPLE COMPL	☐	CASING/CEMENT JOB	☐		
DOWNHOLE COMMINGLE	☐						
CLOSED-LOOP SYSTEM	☐						
OTHER:	☐			OTHER:		MIT	☑

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.

THE MIT WAS RAN FOR A CLOSED LOOP GAS CAPTURE PROJECT AT 110% OF THE MAX ALLOWABLE SURFACE PRESSURE OF 1300 PSI. SEE ATTACHED DOCUMENTS.

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 DATE

Type or print name E-mail address: PHONE:

For State Use Only

APPROVED BY: TITLE DATE

Conditions of Approval (if any):

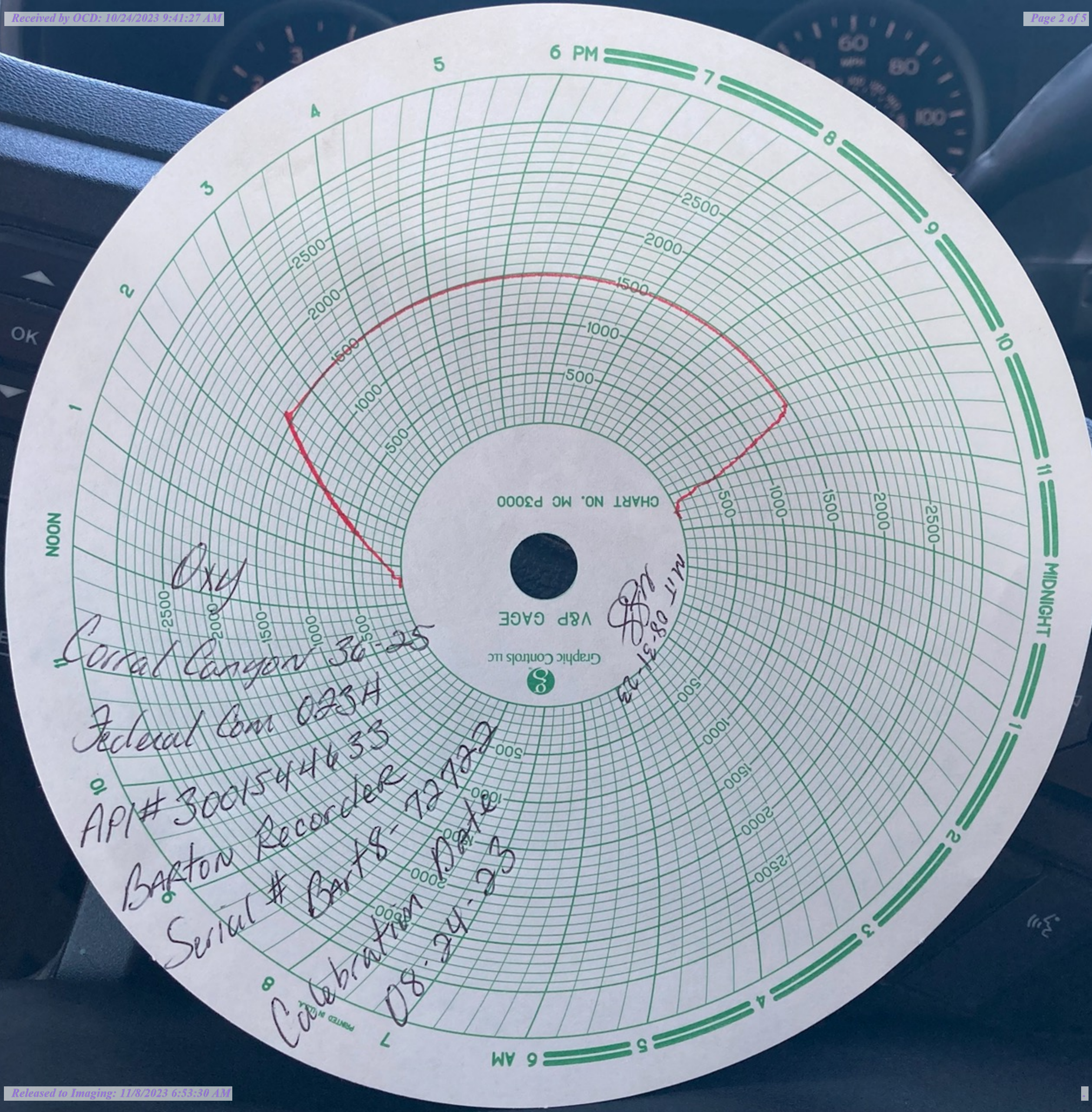
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CHART NO. MC P3000
Graphic Controls LLC
V&P GAGE
M.T 08-31-23
Oxy
Corral Canyon 36-25
Federal Com 023H
API# 3001544633
Barton Recorder
Serial # Bar18-12787
Calibration Date
08-24-23

SPL

Pressure Recorder Calibration Certificate

Company Name: American Safety

Certificate #: Bart8-72722_82423

Recorder Type: Barton

Serial #: Bart8-72722

Pressure Range 1: 0-3000#

Accuracy: +/- 0.2% PSIG

Pressure Range 2: NA

Accuracy: +/- 0.2% PSIG

Temperature Range: NA

Accuracy: +/- 0.1% Deg. F

Pressure Pen 1

Increasing Pressure (PSIG)			Decreasing Pressure (PSIG)			Temperature Pen Temperature Test (F°)		
Applied Pressure	Indicated Pressure	Error %	Applied Pressure	Indicated Pressure	Error %	Applied Temperature	Indicated Temperature	Error %
0	0	0	2400	2400	0	0	0	0
300	0	0	1800	1800	0	0	0	0
900	900	0	1200	1200	0	0	0	0
1500	1500	0	600	600	0	0	0	0
0	0	0	150	150	0	0	0	0
3000	3000	0	0	0	0	0	0	0

Pressure Pen 2

Increasing Pressure (PSIG)			Decreasing Pressure (PSIG)		
Applied Pressure	Indicated Pressure	Error %	Applied Pressure	Indicated Pressure	Error %
0	0	0	0	0	0
0	0	0	0	0	0
0	0	0	0	0	0
0	0	0	0	0	0
0	0	0	0	0	0
0	0	0	0	0	0

This is to certify that this instrument has been inspected and calibrated using a certified 10,000 psi Crystal Gauge.

Calibrated By: Matthew Silva

Calibration Date: 8-24-2023

PERFORMING BRADENHEAD TEST

General Procedure for Bradenhead Test

Identify: All valves prior to testing

Gauges: Install on each casing string to record pressure.

Assure: That all valves are in good working condition and **closed at least 24 hours prior to testing.**

Open: Each valve (Bradenhead, intermediate and casing valves) is to be opened separately.

Check Gauges: Record pressure on each gauge and casing string on BHT form. Open valves to atmosphere and record results on BHT form.

Designate what applies to the result of opening the valves for each string:

- Blow or Puff — Yes or No
- Bled down to Nothing — Yes or No
- Steady Flow — Yes or No
- Oil or Gas — Yes or No
- Water — Yes or No

Start: Injection or SWD pump so tubing pressure can be read.

Instructions below apply to the District 2 Artesia office since this must be reported on a form. In case of pressure:

1. Record pressure reading on gauge.
2. Bleed and note time elapsed to bleed down.
3. Leave valve open for additional observation.
4. Note any fluids expelled.

In absence of Pressure:

1. Leave valve open for additional observation.
2. Note types of fluids expelled.
3. Note if fluids persist throughout test.

Note: Tubing pressure on injection or SWD wells.

Test will be signed by person performing test with a contact phone number.

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State of New Mexico
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1220 S. St Francis Dr.
Santa Fe, NM 87505

CONDITIONS

Action 278727

CONDITIONS

Operator: OXY USA INC P.O. Box 4294 Houston, TX 772104294	OGRID: 16696
	Action Number: 278727
	Action Type: [C-103] Sub. General Sundry (C-103Z)

CONDITIONS

Created By	Condition	Condition Date
gcordero	None	11/8/2023