

Santa Fe Main Office  
Phone: (505) 476-3441  
General Information  
Phone: (505) 629-6116

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
Revised July 18, 2013

Online Phone Directory Visit:  
<https://www.emnrd.nm.gov/ocd/contact-us/>

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

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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"/>		WELL API NO. <b>30-025-52121</b>
2. Name of Operator <b>OXY USA INC</b>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
3. Address of Operator <b>P.O. BOX 50250 MIDLAND, TX 79710</b>		6. State Oil & Gas Lease No.
4. Well Location Unit Letter <b>N</b> : <b>356</b> feet from the <b>SOUTH</b> line and <b>1783</b> feet from the <b>WEST</b> line Section <b>18</b> Township <b>22S</b> Range <b>33E</b> NMPM County <b>LEA</b>		7. Lease Name or Unit Agreement Name <b>SENILE FELINES 18-7 STATE COM</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>3658' GR</b>		8. Well Number <b>71H</b>
		9. OGRID Number <b>16696</b>
		10. Pool name or Wildcat <b>RED TANK; BONE SPRING, EAST</b>

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

<b>NOTICE OF INTENTION TO:</b> 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"/>		<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input checked="" type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input checked="" 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.

Spud 17-1/2" hole 01/12/25, drill to 962' 01/12/25. RIH & set 13-3/8" 54.5# J-55 BTC csg @ 952', pump 30bbl gel spacer then tail cmt w/ 1385sx (310bbl) Class C w/ additives 14.8ppg 1.33 yield, circ 591sx (140bbl) cmt to surface. 01/13/25 RD & release rig.

Spud Date:

**01/12/25**

Rig Release Date:

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

SIGNATURE Jana Mendiola TITLE REGULATORY ADVISOR DATE 01/19/25

Type or print name JANA MENDIOLA E-mail address: janalyn\_mendiola@oxy.com PHONE: 432-685-5936  
**For State Use Only**

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

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CONDITIONS

Action 422189

CONDITIONS

Operator: OXY USA INC P.O. Box 4294 Houston, TX 772104294	OGRID: 16696
	Action Number: 422189
	Action Type: [C-103] Sub. Drilling (C-103N)

CONDITIONS

Created By	Condition	Condition Date
plmartinez	None	9/30/2025