

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

WELL API NO.
 30-015-27627

5. Indicate Type of Lease
 STATE FEE
 6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

SDS 11 FEDERAL

8. Well Number 001

9. OGRID Number
 16696

10. Pool name or Wildcat
 SWD DELAWARE

SUNDRY NOTICES AND REPORTS ON WELLS <small>(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.)</small>		7. Lease Name or Unit Agreement Name SDS 11 FEDERAL
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other SALT WATER DISPOSAL		8. Well Number 001
2. Name of Operator OXY USA INC		9. OGRID Number 16696
3. Address of Operator 5 GREENWAY PLAZA SUITE 110 HOUSTON, TX 77046		10. Pool name or Wildcat SWD DELAWARE
4. Well Location Unit Letter F : 2090 feet from the FNL line and 1980 feet from the FWL line Section 11 Township 24S Range 31E NMPM County EDDY		
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3515'		

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
 CLOSED-LOOP SYSTEM
 OTHER:

SUBSEQUENT REPORT OF:

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

OTHER: **5 YEAR 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.

MIT: SEE ATTACHED CHART

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

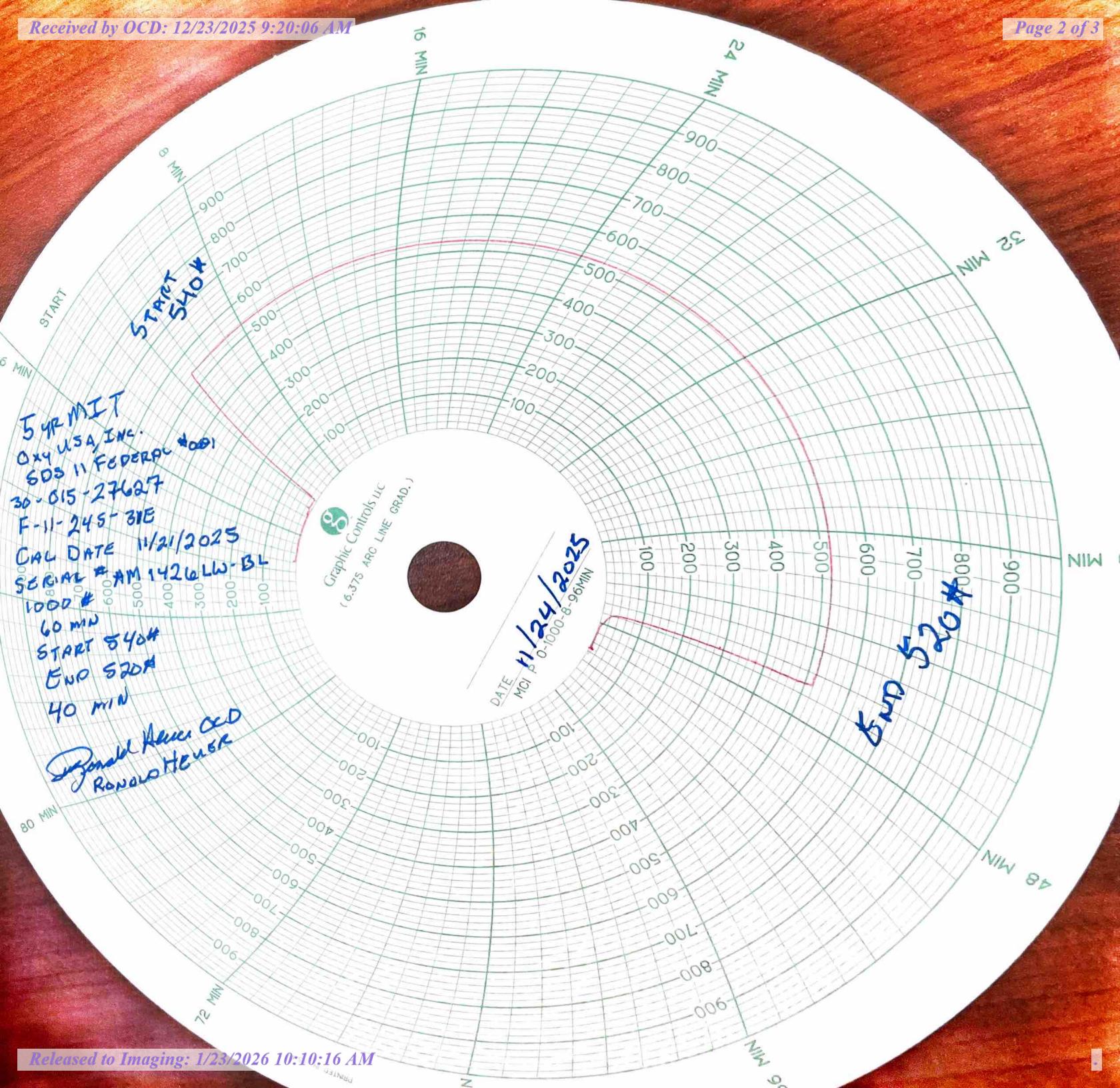


TITLE **REGULATORY ANALYST STAFF** DATE **12.22.2025**

Type or print name **KIM HOFFMAN**
For State Use Only

E-mail address: **kim_hoffman@oxy.com** PHONE: **713.215.7314**

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



Sante Fe Main Office
Phone: (505) 476-3441

General Information
Phone: (505) 629-6116

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

State of New Mexico
Energy, Minerals and Natural Resources
Oil Conservation Division
1220 S. St Francis Dr.
Santa Fe, NM 87505

CONDITIONS

Action 537119

CONDITIONS

Operator: OXY USA INC P.O. Box 4294 Houston, TX 772104294	OGRID: 16696
	Action Number: 537119
	Action Type: [C-103] Sub. General Sundry (C-103Z)

CONDITIONS

Created By	Condition	Condition Date
gcordero	None	1/23/2026