

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 87240
District II
811 South First, Artesia, NM 87210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised March 25, 1999

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

WELL API NO. 30-059-20396
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name: Bravo Dome Carbon Dioxide Gas Unit 1835
8. Well No. 052
9. Pool name or Wildcat Bravo Dome Carbon Dioxide Gas 640

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 CO2 Supply
2. Name of Operator OXY USA Inc. 16696
3. Address of Operator P.O. Box 50250 Midland, TX 79710-0250
4. Well Location Unit Letter <u>E</u> : <u>1621</u> feet from the <u>north</u> line and <u>941</u> feet from the <u>west</u> line Section <u>5</u> Township <u>18N</u> Range <u>35E</u> NMPM County Union
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 4658.1

11. 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 COMPLETION <input type="checkbox"/> OTHER: Request 1 year extension <input checked="" type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER: <input type="checkbox"/>

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

OXY USA Inc. respectfully requests that the APD for the above mentioned well be granted a one year extension. This permit will expire 5/7/05. Please see attached for a copy of the C-101.

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

SIGNATURE David Stewart TITLE Sr. Regulatory Analyst DATE 4/13/04

Type or print name David Stewart Telephone No. 432-685-5717

(This space for State use)
APPROVED BY [Signature] TITLE DISTRICT SUPERVISOR DATE 4/22/04
Conditions of approval, if any:

Expires 5/7/05