

Submit 3 Copies to Appropriate District Office
 District I
 1625 N. French Dr., Hobbs, NM 87240
 District II
 1301 W. Grand Ave., Artesia, NM 88210
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 June 19, 2008

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

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 Gas Well Other CO2 Supply Well

2. Name of Operator
 OXY USA Inc.

3. Address of Operator
 P.O. Box 4294, Houston, TX 77210-4294

WELL API NO. 30-021-20636
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 1933
8. Well Number 272K
9. OGRID Number 16696
10. Pool name or Wildcat Bravo Dome Carbon Dioxide Gas 640

4. Well Location
 Unit Letter K ; 1700 feet from the South line and 1700 feet from the West line
 Section 27 Township 19-N Range 33-E NMPM County Harding

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
 4835' GR

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
WELL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
WELLBORE COMMINGLE <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: Completion <input checked="" type="checkbox"/>	

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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

See Attached

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 Mark Stephens TITLE Regulatory Compliance Analyst DATE 1/22/15
 Type or print name Mark Stephens E-mail address: Mark_Stephens@oxy.com PHONE (713) 366-5158

For State Use Only
 APPROVED BY _____ TITLE _____ DATE _____
 Conditions of Approval (if any): _____

BDCDGL 1933-272K
API No. 30-021-20636
Harding Co., NM

8/19/14 - Run GR/cased hole CNL.

9/24/14 - Perf @ 2480'-2540', 4 JSPF. 240 shots. Blow well dry with coil tubing unit. Flow well to pit for clean out. Hook up flowline and wait to fracture stimulate the well.

10/14/14 - Put well on production x tie in to facilities.

Rate: 106 MSCF/D
Tubing Pressure: 52 psi
Plate Size: 1.0"
