Submit 1 Copy To Appropriate District Office	State of New Mexico		Form C-103	
District I	Energy, Minerals and Natural Resources		October 13, 2009	
1625 N. French Dr., Hobbs, NM 88240 District II			WELL API NO. <b>30-021-20505</b>	
1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION		5. Indicate Type of Lease	
<u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.		STATE	☐ FEE ⊠
District IV	Santa Fe, NM 87505		6. State Oil & G	
1220 S. 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			7. Lease Name or Unit Agreement Name WEST BRAVO DOME UNIT (319259)	
das weii Guide CO21 ROBCENG WEEL			8. Well Number 181	
2. Name of Operator OXY USA Inc.			9. OGRID Number 16696	
3. Address of Operator			10. Pool name or Wildcat WEST BRAVO DOME CARBON DIOXIDE GAS (96387)	
P.O. Box 303, AMISTAD, NM 88410				
4. Well Location				
Unit LetterF: _2210feet from theNORTH_ line and1650_feet from theWESTline				
Section 18	Township 19N	Range 30E	NMPM HA	RDING County
	11. Elevation (Show whether DR,			1.1
	GL: 4	479'		
NOTICE OF IN PERFORM REMEDIAL WORK  TEMPORARILY ABANDON PULL OR ALTER CASING DOWNHOLE COMMINGLE	Appropriate Box to Indicate Na ITENTION TO: PLUG AND ABANDON  CHANGE PLANS  MULTIPLE COMPL		SEQUENT RE	
07450		OTUED COMP	ETE TA MODIC	
OTHER:	lated operations (Clearly state all r	OTHER: COMPL		tos including astimated data
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.				
WELL IS A TUBINGLESS COMPLETION WITH 4 ½" FG PRODUCTION CASING FROM THE TUBB FORMATION TO SURFACE SEE ENCLOSED CORRECTED WELLBORE DIAGRAM (INFO ON COMPLETION FORM INCORRECT) ALSO ENCLOSED ORIGINAL REQUEST FOR TUBINGLESS COMPLETION				
10/15/2018 ALL WELLHEAD VALVES SHUT IN 10/25/2018 PRESSURE: 540 PSIG				
Spud Date: 4/15/201	Rig Release Da	te:		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.				
Guman .				
SIGNATURE TITLE: _SR ENG ADVISOR DATE 10/29/2018				
Type or print nameAL GIUSSANI E-mail address: _albert_giussani@oxy.com_ PHONE: _806-638-1296  For State Use Only				
APPROVED BY: Conditions of Approval (if any):	TITLE E	rgineer	DA	ATE 11-15-18