

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals, and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I

P.O. Box 1980, Hobbs, NM 88240

DISTRICT II

P.O. Drawer DD, Artesia, NM 88210

DISTRICT III

1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

WELL API NO.

30-021-20546

5. Indicate Type of Lease

STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

WEST BRAVO DOME UNIT

8. Well No.

19 29 23 1 J

9. Pool name or Wildcat

WEST BRAVO DOME CO2 GAS

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 PRODUCER

2. Name of Operator

OXY USA Inc.

3. Address of Operator

P.O. Box 303, AMISTAD, NEW MEXICO 88410

4. Well Location

Unit Letter

J

: 1650

Feet From The

SOUTH

Line and

1980

Feet From The

EAST

Line

Section

14

Township

19N

Range

29E

NMPM

HARDING

County

10. Elevation

(Show whether DF, RKB, RT, GR, etc.)

4515

GR

11. 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 ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: Yearly Pressure for TA Status extension ☒

12. Describe Proposed or Completed Operations
SEE RULE 1103.

(Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work)

YEAR	MONTH/DAY	TBG. PRESS.	CSG. PRESS.	BLEED DOWN TIME
2013	2/13	510 PSIG	0	
2014	2/19	540 PSIG	0	
2015	1/8	550 PSIG	0	
2016	2/10	370 PSIG	0	
2017	3/13	550 PSIG	0	
2018	3/22	550 PSIG	0	
2019	3/5	555 PSIG	0	

TA UNTIL
4/1/2020

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

SIGNATURE



TITLE

Engineering Advisor

DATE

3/14/2019

TYPE OR PRINT NAME

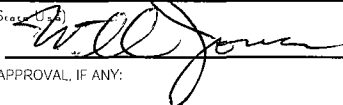
Al Giussani

TELEPHONE NO.

806 638 1296

(This space for State Use)

APPROVED BY



TITLE

Engineer

DATE

3/19/19

CONDITIONS OF APPROVAL, IF ANY: