

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

Form C-103
 Revised July 18, 2013

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.)		WELL API NO. 3001546048
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator OXY USA INC.		6. State Oil & Gas Lease No.
3. Address of Operator 5 GREENWAY PLAZA SUITE 110, HOUSTON, TX, 77046		7. Lease Name or Unit Agreement Name STERLING SILVER MDP1 33-4 FEDERAL COM
4. Well Location Unit Letter <u>A</u> : <u>96</u> feet from the <u>NORTH</u> line and <u>529</u> feet from the <u>EAST</u> line Section <u>33</u> Township <u>23S</u> Range <u>31E</u> NMPM <u>EDDY</u> County		8. Well Number 178H
11. Elevation (<i>Show whether DR, RKB, RT, GR, etc.</i>)		9. OGRID Number 16696
10. Pool name or Wildcat INGLE WELLS; BONE SPRING		

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"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: PLC 616 UPDATE <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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

OXY USA INC. requests approval to amend PLC 616. STERLING SILVER MDP1 33-4 FEDERAL COM 178H had a pool change from the WC-015 G-08 S233135D; WOLFCAMP (98236) pool to INGLE WELLS; BONE SPRING (33740). This pool is already included on PLC 616. Attached is the approved C102.

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 Kathleen Mowery TITLE REGULATORY ENGINEER DATE 6/18/2020

Type or print name Kathleen Mowery E-mail address: Kathleen_Mowery@oxy.com PHONE: 713-366-5109

For State Use Only

APPROVED BY: _____ TITLE _____ DATE _____

Conditions of Approval (if any):