

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

WELL API NO.	30-015-46112
5. Indicate Type of Lease	STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name	MESA VERDE WC UNIT
8. Well Number	#20H
9. OGRID Number	16696
10. Pool name or Wildcat	MESA VERDE; WOLFCAMP

**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

2. Name of Operator OXY USA INC

3. Address of Operator 5 GREENWAY PLAZA SUITE 110, HOUSTON TX 77046

4. Well Location  
 Unit Letter M : 118 feet from the SOUTH line and 1068 feet from the WEST line  
 Section 13 Township 24S Range 31E NMPM County EDDY

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

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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
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: SURFACE COMMINGLE <input checked="" type="checkbox"/>		OTHER: <input 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 requests approval to add Mesa Verde Wolfcamp 20H to PC 1318 with allocation by well test per frequency and required by Order R-14299. Attached is the C-102.

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  TITLE REGULATORY ENGINEER DATE 5/10/2021

Type or print name SANDRA MUSALLAM E-mail address: SANDRA\_MUSALLAM@OXY.COM PHONE: 713-366-5106

**For State Use Only**

APPROVED BY: Dean R. McClure TITLE Petroleum Engineer DATE 05/28/2021

Conditions of Approval (if any):

District I  
1625 N. French Dr., Hobbs, NM 88240  
Phone: (575) 393-6161 Fax: (575) 393-0720  
District II  
811 S. First St., Artesia, NM 88210  
Phone: (575) 748-1283 Fax: (575) 748-9720  
District III  
1000 Rio Brancho Road, Aztec, NM 87410  
Phone: (505) 334-6178 Fax: (505) 334-6170  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505  
Phone: (505) 476-1460 Fax: (505) 476-3462

State of New Mexico  
Energy, Minerals & Natural Resources Department  
**OIL CONSERVATION DIVISION**  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-102  
Revised August 1, 2011  
Submit one copy to appropriate  
District Office

AMENDED REPORT

**WELL LOCATION AND ACREAGE DEDICATION PLAT**

API Number <b>30-015-46112</b>	Pool Code <b>98252</b>	Pool Name <b>MESA VERDE; WOLFCAMP</b>
Property Code <b>320829</b>	Property Name <b>MESA VERDE WC UNIT</b>	Well Number <b>20H</b>
OGRID No. <b>16696</b>	Operator Name <b>OXY USA INC.</b>	Elevation <b>3588.3'</b>

**Surface Location**

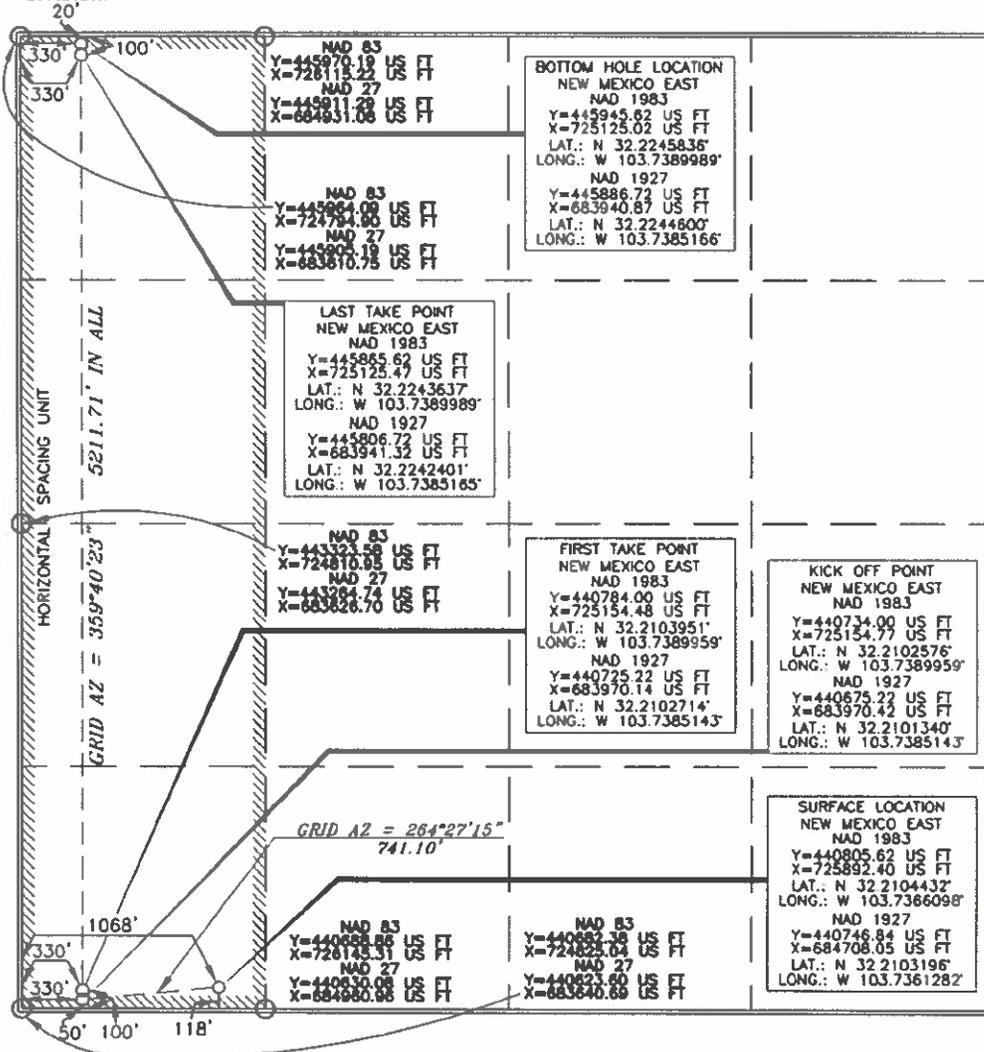
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
M	13	24 SOUTH	31 EAST, N.M.P.M.		118'	SOUTH	1068'	WEST	EDDY

**Bottom Hole Location If Different From Surface**

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
D	13	24 SOUTH	31 EAST, N.M.P.M.		20'	NORTH	330'	WEST	EDDY

Dedicated Acres <b>160</b>	Joint or Infill	Consolidation Code	Order No.
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No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.



**OPERATOR CERTIFICATION**

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

*Leslie T. Reeves* 3/11/2021

Signature Date  
**LESLIE REEVES**  
Printed Name  
**LESLIE\_REEVES@OXY.COM**  
E-mail Address

**SURVEYOR CERTIFICATION**

I hereby certify that the well location shown on this plat was plotted from field notes by actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.

*Tony J. Reed*  
Date of Survey  
**15079**  
**AUGUST 23, 2018**

Signature and Title of Professional Surveyor  
*Tony J. Reed*  
Certificate Number  
**15079**

<b>Well Name:</b> MESA VERDE WC UNIT	<b>Well Location:</b> T24S / R31E / SEC 13 / SWSW / 32.2104432 / -103.7366098	<b>County or Parish/State:</b> EDDY / NM
<b>Well Number:</b> 20H	<b>Type of Well:</b> OIL WELL	<b>Allottee or Tribe Name:</b>
<b>Lease Number:</b> NMNM114979	<b>Unit or CA Name:</b> MESA VERDE WOLFCAMP RDU PA A	<b>Unit or CA Number:</b> NMNM137099A
<b>US Well Number:</b> 300154611200X1	<b>Well Status:</b> Drilling Well	<b>Operator:</b> OXY USA INCORPORATED

**Notice of Intent**

**Type of Submission:** Notice of Intent

**Type of Action:** Other

**Date Sundry Submitted:** 03/11/2021

**Time Sundry Submitted:** 02:53

**Date proposed operation will begin:** 05/27/2021

**Procedure Description:** OXY USA Inc requests approval to change the pool, APD casing, cement and mud programs for the subject well. Also note the offline cementing and BOP Break testing variance requests added to the drill plan. Please find the attached revised well plat, drill plan and directional for BLM approval.

**Surface Disturbance**

**is any additional surface disturbance proposed?:** No

**NOI Attachments**

**Procedure Description**

MesaVerdeWCUnit20H\_C102\_20210311145146.pdf

MesaVerdeWCUnit20H\_DirectPlan\_20210311143519.pdf

MesaVerdeWCUnit20H\_DirectPlot\_20210311143500.pdf

MESAVERDEWCUNIT20H\_Dri#Plan\_20210311143446.pdf

<b>Well Name:</b> MESA VERDE WC UNIT	<b>Well Location:</b> T24S / R31E / SEC 13 / SWSW / 32.2104432 / -103.7366098	<b>County or Parish/State:</b> EDDY / NM
<b>Well Number:</b> 20H	<b>Type of Well:</b> OIL WELL	<b>Allottee or Tribe Name:</b>
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<b>US Well Number:</b> 300154611200X1	<b>Well Status:</b> Drilling Well	<b>Operator:</b> OXY USA INCORPORATED

**Conditions of Approval**

**Additional Reviews**

Mesa\_Verde\_WC\_Unit\_12H\_DrillingSundryCOA\_1517940\_20210330091450.pdf

**Operator Certification**

*I certify that the foregoing is true and correct. Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction. Electronic submission of Sundry Notices through this system satisfies regulations requiring a submission of Form 3160-5 or a Sundry Notice.*

**Operator Electronic Signature:** REEVES **Signed on:** MAR 11, 2021 02:52 PM  
**Name:** OXY USA INCORPORATED  
**Title:** Advisor Regulatory  
**Street Address:** 5 GREENWAY PLAZA, SUITE 110  
**City:** HOUSTON **State:** TX  
**Phone:** (713) 497-2492  
**Email address:** LESLIE\_REEVES@OXY.COM

**Field Representative**

**Representative Name:**  
**Street Address:**  
**City:** **State:** **Zip:**  
**Phone:**  
**Email address:**

**BLM Point of Contact**

<b>BLM POC Name:</b> NDUNGU KAMAU	<b>BLM POC Title:</b> Petroleum Engineering Technician
<b>BLM POC Phone:</b> 5752345938	<b>BLM POC Email Address:</b> nkamau@blm.gov
<b>Disposition:</b> Approved	<b>Disposition Date:</b> 04/07/2021
<b>Signature:</b> N. Mandela Kamau	