

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

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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. 30-015-46780
1. Type of Well: Oil Well <input checked="" 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 DEPTH CC 6 7 FEDERAL COM
4. Well Location Unit Letter C : 170 feet from the NORTH line and 1320 feet from the WEST line Section 6 Township 24S Range 29E NMPM County EDDY		8. Well Number #042H
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. OGRID Number 16696
		10. Pool name or Wildcat PURPLE SAGE; WOLFCAMP (GAS)

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: SURFACE COMMINGLE - PC 1359 <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 add Depth CC 6 7 Federal Com #042H to PC 1359 Train #1 with allocation by well test per frequency and required by Order R-14299. Attached is the C-102.

This request is for oil production only. Gas production will be handled through an amendment to PLC-750.

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 06/02/2021

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 06/03/2021

Conditions of Approval (if any):

RECEIVED

FEB 24 2020

District I  
1625 N. French Dr., Hobbs, NM 88240  
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District II  
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District III  
1000 Rio Grande Road, Artesia, NM 87410  
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District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505  
Phone: (505) 476-3460 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

EMNRD-OCD ARTESIA

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>30-015-46780</b>	Pool Code <b>96220</b>	Pool Name <b>Purple Sage Wolfcamp</b>
Property Code <b>327181</b>	Property Name <b>DEPTH CC "6-7" FEDERAL COM</b>	Well Number <b>42H</b>
OGRID No. <b>16696</b>	Operator Name <b>OXY USA INC.</b>	Elevation <b>2958.9'</b>

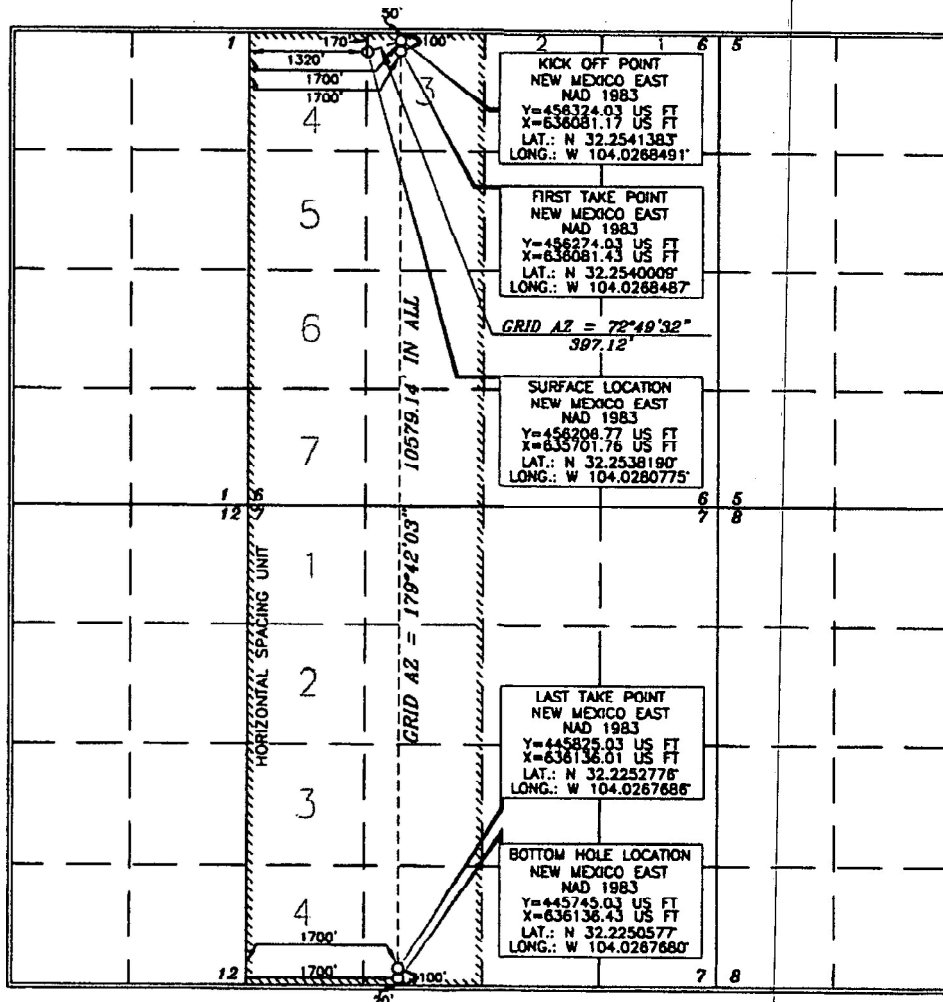
## Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
<b>3</b>	<b>6</b>	<b>24 SOUTH</b>	<b>29 EAST, N.M.P.M.</b>		<b>170'</b>	<b>NORTH</b>	<b>1320'</b>	<b>WEST</b>	<b>EDDY</b>

## 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
<b>N</b>	<b>7</b>	<b>24 SOUTH</b>	<b>29 EAST, N.M.P.M.</b>		<b>20'</b>	<b>SOUTH</b>	<b>1700'</b>	<b>WEST</b>	<b>EDDY</b>
Dedicated Acres <b>6.40</b>		Joint or Infill <b>Y</b>	Consolidation Code	Order No.					

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 an undivided 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 hereafter entered by the Division.

Signature: *[Signature]* Date: **7/30/19**

Printed Name: **David Stewart**

E-mail Address: **David.Stewart@oxy.com**

## SURVEYOR CERTIFICATION

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

Date of Survey: **MAY 3, 2019**

Signature and Seal: *[Signature]*  
Professional Surveyor

Certificate Number: **15079**

WOF 190226WL-b (Rev. A) (NA)

KS 2-24-20