

Initial Application Part I

Received 7/6/2021

This application is placed in file for record. It MAY or MAY NOT have been reviewed to be determined Administratively Complete

RECEIVED: 7/6/21	REVIEWER:	TYPE: SWD	APP NO: pBL2118842788
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ABOVE THIS TABLE FOR OCD DIVISION USE ONLY

NEW MEXICO OIL CONSERVATION DIVISION
 - Geological & Engineering Bureau -
 1220 South St. Francis Drive, Santa Fe, NM 87505



ADMINISTRATIVE APPLICATION CHECKLIST

THIS CHECKLIST IS MANDATORY FOR ALL ADMINISTRATIVE APPLICATIONS FOR EXCEPTIONS TO DIVISION RULES AND REGULATIONS WHICH REQUIRE PROCESSING AT THE DIVISION LEVEL IN SANTA FE

Applicant: _____ **OGRID Number:** _____
Well Name: _____ **API:** _____
Pool: _____ **Pool Code:** _____

SUBMIT ACCURATE AND COMPLETE INFORMATION REQUIRED TO PROCESS THE TYPE OF APPLICATION INDICATED BELOW

- 1) **TYPE OF APPLICATION:** Check those which apply for [A]
 A. Location – Spacing Unit – Simultaneous Dedication
 NSL NSP_(PROJECT AREA) NSP_(PRORATION UNIT) SD
- B. Check one only for [I] or [II]
 [I] Commingling – Storage – Measurement
 DHC CTB PLC PC OLS OLM
 [II] Injection – Disposal – Pressure Increase – Enhanced Oil Recovery
 WFX PMX SWD IPI EOR PPR

SWD-2437

- 2) **NOTIFICATION REQUIRED TO:** Check those which apply.
 A. Offset operators or lease holders
 B. Royalty, overriding royalty owners, revenue owners
 C. Application requires published notice
 D. Notification and/or concurrent approval by SLO
 E. Notification and/or concurrent approval by BLM
 F. Surface owner
 G. For all of the above, proof of notification or publication is attached, and/or,
 H. No notice required

FOR OCD ONLY
<input type="checkbox"/> Notice Complete
<input type="checkbox"/> Application Content Complete

3) **CERTIFICATION:** I hereby certify that the information submitted with this application for administrative approval is **accurate** and **complete** to the best of my knowledge. I also understand that **no action** will be taken on this application until the required information and notifications are submitted to the Division.

Note: Statement must be completed by an individual with managerial and/or supervisory capacity.

 Print or Type Name

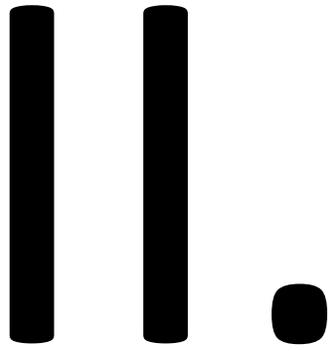
Date

Leslie J. Reeves

 Signature

Phone Number

e-mail Address



APPLICATION FOR AUTHORIZATION TO INJECT

- I. PURPOSE: _____ Secondary Recovery _____ Pressure Maintenance _____ Disposal _____ Storage
Application qualifies for administrative approval? _____ Yes _____ No
- II. OPERATOR: _____
ADDRESS: _____
CONTACT PARTY: _____ PHONE: _____
- III. WELL DATA: Complete the data required on the reverse side of this form for each well proposed for injection.
Additional sheets may be attached if necessary.
- IV. Is this an expansion of an existing project? _____ Yes _____ No
If yes, give the Division order number authorizing the project: _____
- V. Attach a map that identifies all wells and leases within two miles of any proposed injection well with a one-half mile radius circle drawn around each proposed injection well. This circle identifies the well's area of review.
- VI. Attach a tabulation of data on all wells of public record within the area of review which penetrate the proposed injection zone. Such data shall include a description of each well's type, construction, date drilled, location, depth, record of completion, and a schematic of any plugged well illustrating all plugging detail.
- VII. Attach data on the proposed operation, including:
1. Proposed average and maximum daily rate and volume of fluids to be injected;
 2. Whether the system is open or closed;
 3. Proposed average and maximum injection pressure;
 4. Sources and an appropriate analysis of injection fluid and compatibility with the receiving formation if other than reinjected produced water; and,
 5. If injection is for disposal purposes into a zone not productive of oil or gas at or within one mile of the proposed well, attach a chemical analysis of the disposal zone formation water (may be measured or inferred from existing literature, studies, nearby wells, etc.).
- *VIII. Attach appropriate geologic data on the injection zone including appropriate lithologic detail, geologic name, thickness, and depth. Give the geologic name, and depth to bottom of all underground sources of drinking water (aquifers containing waters with total dissolved solids concentrations of 10,000 mg/l or less) overlying the proposed injection zone as well as any such sources known to be immediately underlying the injection interval.
- IX. Describe the proposed stimulation program, if any.
- *X. Attach appropriate logging and test data on the well. (If well logs have been filed with the Division, they need not be resubmitted).
- *XI. Attach a chemical analysis of fresh water from two or more fresh water wells (if available and producing) within one mile of any injection or disposal well showing location of wells and dates samples were taken.
- XII. Applicants for disposal wells must make an affirmative statement that they have examined available geologic and engineering data and find no evidence of open faults or any other hydrologic connection between the disposal zone and any underground sources of drinking water.
- XIII. Applicants must complete the "Proof of Notice" section on the reverse side of this form.
- XIV. Certification: I hereby certify that the information submitted with this application is true and correct to the best of my knowledge and belief.
- NAME: _____ TITLE: _____
SIGNATURE: Leslie J. Reeves DATE: _____
E-MAIL ADDRESS: _____
- * If the information required under Sections VI, VIII, X, and XI above has been previously submitted, it need not be resubmitted. Please show the date and circumstances of the earlier submittal: _____

III. WELL DATA

A. The following well data must be submitted for each injection well covered by this application. The data must be both in tabular and schematic form and shall include:

- (1) Lease name; Well No.; Location by Section, Township and Range; and footage location within the section.
- (2) Each casing string used with its size, setting depth, sacks of cement used, hole size, top of cement, and how such top was determined.
- (3) A description of the tubing to be used including its size, lining material, and setting depth.
- (4) The name, model, and setting depth of the packer used or a description of any other seal system or assembly used.

Division District Offices have supplies of Well Data Sheets which may be used or which may be used as models for this purpose. Applicants for several identical wells may submit a "typical data sheet" rather than submitting the data for each well.

B. The following must be submitted for each injection well covered by this application. All items must be addressed for the initial well. Responses for additional wells need be shown only when different. Information shown on schematics need not be repeated.

- (1) The name of the injection formation and, if applicable, the field or pool name.
- (2) The injection interval and whether it is perforated or open-hole.
- (3) State if the well was drilled for injection or, if not, the original purpose of the well.
- (4) Give the depths of any other perforated intervals and detail on the sacks of cement or bridge plugs used to seal off such perforations.
- (5) Give the depth to and the name of the next higher and next lower oil or gas zone in the area of the well, if any.

XIV. PROOF OF NOTICE

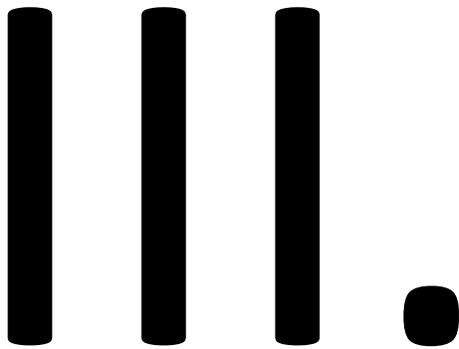
All applicants must furnish proof that a copy of the application has been furnished, by certified or registered mail, to the owner of the surface of the land on which the well is to be located and to each leasehold operator within one-half mile of the well location.

Where an application is subject to administrative approval, a proof of publication must be submitted. Such proof shall consist of a copy of the legal advertisement which was published in the county in which the well is located. The contents of such advertisement must include:

- (1) The name, address, phone number, and contact party for the applicant;
- (2) The intended purpose of the injection well; with the exact location of single wells or the Section, Township, and Range location of multiple wells;
- (3) The formation name and depth with expected maximum injection rates and pressures; and,
- (4) A notation that interested parties must file objections or requests for hearing with the Oil Conservation Division, 1220 South St. Francis Dr., Santa Fe, New Mexico 87505, within 15 days.

NO ACTION WILL BE TAKEN ON THE APPLICATION UNTIL PROPER PROOF OF NOTICE HAS BEEN SUBMITTED.

NOTICE: Surface owners or offset operators must file any objections or requests for hearing of administrative applications within 15 days from the date this application was mailed to them.



INJECTION WELL DATA SHEET

OPERATOR: _____

WELL NAME & NUMBER: _____

WELL LOCATION: _____

FOOTAGE LOCATION

UNIT LETTER

SECTION

TOWNSHIP

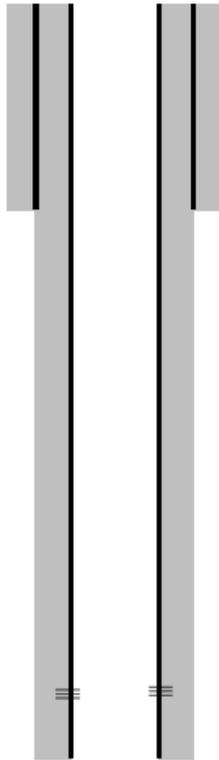
RANGE

WELLBORE SCHEMATIC

WELL CONSTRUCTION DATA

Surface Casing

OXY USA Inc. - Current
West Bravo Dome Unit SWD #271
API No. 30-021-20540



Spud 07/06/2012

12-1/4" hole @ 776'
8-5/8" 24# csg @ 776'
w/ 415sx-TOC-Surf-Circ.

7-7/8" hole @ 2221' MD
5-1/2" 15.5# csg @ 2221'
w/ 332sx-TOC-Surf-Circ.

Perfs 2030' - 2055'

PBTD - 2221'

TD - 2221'V

Hole Size: _____ Casing Size: _____

Cemented with: _____ sx. **or** _____ ft³

Top of Cement: _____ Method Determined: _____

Intermediate Casing

Hole Size: _____ Casing Size: _____

Cemented with: _____ sx. **or** _____ ft³

Top of Cement: _____ Method Determined: _____

Production Casing

Hole Size: _____ Casing Size: _____

Cemented with: _____ sx. **or** _____ ft³

Top of Cement: _____ Method Determined: _____

Total Depth: _____

PROPOSED Injection Interval

_____ feet to _____

(Perforated or Open Hole; indicate which)

INJECTION WELL DATA SHEET

Tubing Size: _____ Lining Material: _____

Type of Packer: _____

Packer Setting Depth: _____

Other Type of Tubing/Casing Seal (if applicable): _____

Additional Data

1. Is this a new well drilled for injection? _____ Yes _____ No

If no, for what purpose was the well originally drilled? _____

2. Name of the Injection Formation: _____

3. Name of Field or Pool (if applicable): _____

4. Has the well ever been perforated in any other zone(s)? List all such perforated intervals and give plugging detail, i.e. sacks of cement or plug(s) used. _____

5. Give the name and depths of any oil or gas zones underlying or overlying the proposed injection zone in this area: _____

DISTRICT I
1625 N. French Dr., Hobbs, NM 88240

DISTRICT II
1301 W. Grand Avenue, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

DISTRICT IV
1220 S. St. Francis Dr., Santa Fe, NM 87503

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-102
Revised July 18, 2010

Submit one copy to appropriate
District Office

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, New Mexico 87505

WELL LOCATION AND ACREAGE DEDICATION PLAT

AMENDED REPORT

API Number 30-021-20540	Pool Code 98148	Pool Name SWD; TUBB
Property Code 325145	Property Name WEST BRAVO DOME UNIT SWD	Well Number 271F
OGRID No. 16696	Operator Name OXY USA INC.	Elevation 4333'

Surface Location

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
F	27	18 N	30 E	F	1650	NORTH	1650	WEST	HARDING

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

Dedicated Acres	Joint or Infill	Consolidation Code U	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

<p style="text-align: center;">SURFACE LOCATION Lat - N 35°45'48.91" Long - W 103°44'38.66" NMSPC - N 1733752.106 E 716152.217 (NAD-83)</p>	<p>OPERATOR CERTIFICATION</p> <p>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.</p> <p><i>Leslie Reeves</i> 3/05/19 Signature Date</p> <p>LESLIE REEVES Printed Name</p> <p>LESLIE_REEVES@OXY.COM Email Address</p>
	<p>SURVEYOR CERTIFICATION</p> <p>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.</p>
	<p>Date Surveyed</p> <p>Signature & Seal of Professional Surveyor</p>
	<p>Certificate No. Gary L. Jones 7977</p> <p>BASIN SURVEYS 23207</p>

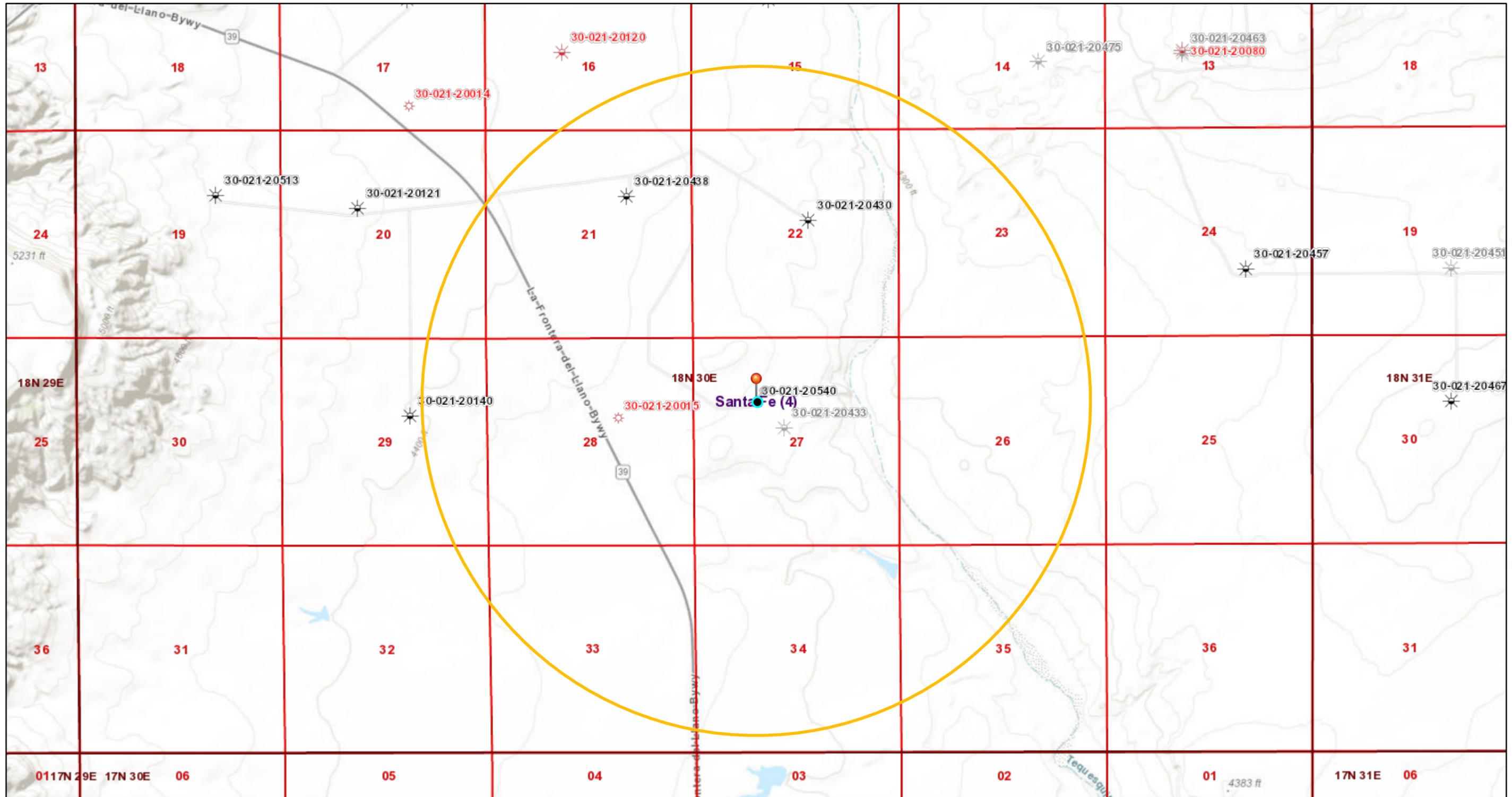
IV.

IV. EXPANSION OF AN EXISTING PROJECT?

YES. WE WOULD LIKE TO CHANGE IT TO THE YESO FORMATION. THE CURRENT SWD ORDER IS SWD-1385 FOR THE TUBB FORMATION.

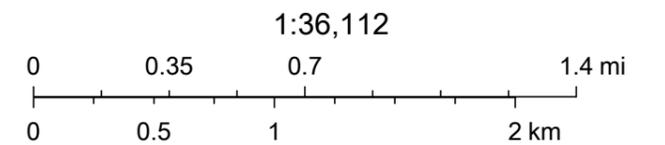
V.

West Bravo Dome Unit SWD #271 2-Mile AOR Map

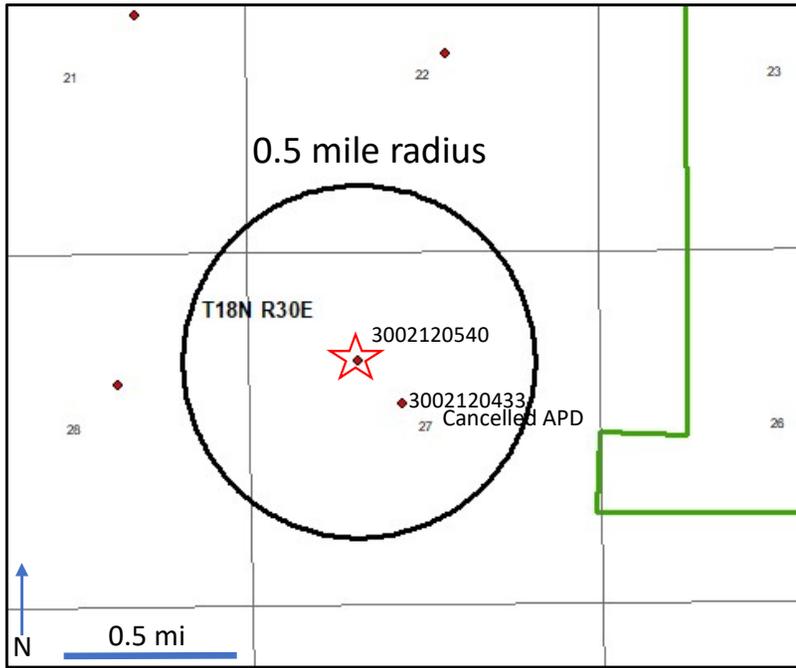


4/5/2021, 1:30:57 PM

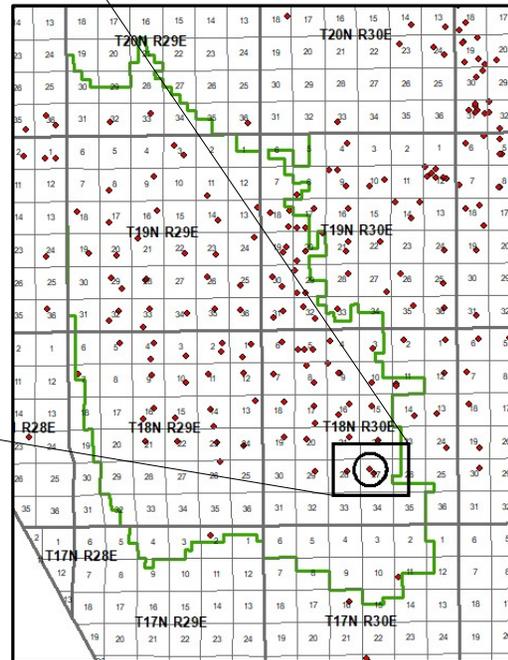
- | | | | | |
|---------------------|------------------------------|------------------------------------|-----------------------------------|---|
| Wells - Large Scale | ✱ CO2, Temporarily Abandoned | ⚙ Injection, Active | ● Oil, Cancelled | ▲ Salt Water Injection, New |
| ? undefined | ✱ Gas, Active | ⚙ Injection, Cancelled | ● Oil, New | ▲ Salt Water Injection, Plugged |
| ● Miscellaneous | ✱ Gas, Cancelled | ⚙ Injection, New | ● Oil, Plugged | ▲ Salt Water Injection, Temporarily Abandoned |
| ✱ CO2, Active | ✱ Gas, New | ⚙ Injection, Plugged | ● Oil, Temporarily Abandoned | ● Water, Active |
| ✱ CO2, Cancelled | ✱ Gas, Plugged | ⚙ Injection, Temporarily Abandoned | ▲ Salt Water Injection, Active | ● Water, Cancelled |
| ✱ CO2, New | ✱ Gas, Temporarily Abandoned | ● Oil, Active | ▲ Salt Water Injection, Cancelled | ● Water, New |
| ✱ CO2, Plugged | | | | |



Oil Conservation Division of the New Mexico Energy, Minerals and Natural Resources Department., Bureau of Land Management, Texas Parks & Wildlife, Esri, HERE, Garmin, INCREMENT P, USGS, METI/NASA, EPA, USDA, OCD, BLM



There are no wells within 0.5 miles of the subject well.



VI.

LIST OF WELL - 2-MILE AOR										
API NO.	WELL NAME	WELL TYPE	WELL STATUS	OPERATOR NAME	LOCATION	POOL CODE	POOL NAME	SPUD DATE	TOTAL DEPTH	COMPLETION DATE
3002120540	WEST BRAVO DOME UNIT SWD #271	SWD	ACTIVE	OXY USA INC.	F-27-18N-30E	98148	SWD; TUBB	7/6/2012	2221'	Feb-2013
3002120433	MITCHELL #271	CO2	CANCELLED APD	HESS CORPORATION	F-27-18N-30E	96387	WEST BRAVO DOME CO2 GAS			
3002120015	PRE-ONGARD WELL #001	GAS	PLUGGED	PRE-ONGARD WELL OPERATOR	G-28018N039E			1/1/1900	Plugged	
3002120430	WEST BRAVO DOME UNIT #221	CO2	ACTIVE	OXY USA INC.	G-22-18N-30E	96387	WEST BRAVO DOME CO2 GAS	6/24/2007	2210'	Feb-2009
3002120438	WEST BRAVO DOME UNIT #211	CO2	ACTIVE	OXY USA INC.	G-21-18N-30E	96387	WEST BRAVO DOME CO2 GAS	6/28/2007	2220'	Feb-2009

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DISTRIBUTION	
SANTA FE	✓
FILE	✓
U.S.G.S.	
LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION
WELL COMPLETION OR RECOMPLETION REPORT AND LOG

5a. Indicate Type of Lease
State Fee

5. State Oil & Gas Lease No.

1a. TYPE OF WELL
OIL WELL GAS WELL DRY OTHER _____

b. TYPE OF COMPLETION
NEW WELL WORK OVER DEEPEN PLUG BACK DIFF. RESVR. OTHER _____

2. Name of Operator
S. E. C. CORPORATION

3. Address of Operator
P. O. BOX 37, SOLANO, NEW MEXICO 87746

4. Location of Well
UNIT LETTER **G** LOCATED **3305** FEET FROM THE **West** LINE AND **1980** FEET FROM
THE **North** LINE OF SEC. **28** TWP. **18N** RGE. **30E** NMPM

7. Unit Agreement Name
8. Farm or Lease Name
Mitchell

9. Well No.
15

10. Field and Pool, or Wildcat
Wildcat

12. County
Harding

15. Date Spudded **3/9/71** 16. Date T.D. Reached **3/13/71** 17. Date Compl. (Ready to Prod.) _____

18. Elevations (DF, RKB, RT, GR, etc.) **4353 RKB** 19. Elev. Casinghead **4347**

20. Total Depth **2108** 21. Plug Back T.D. **-** 22. If Multiple Compl., How Many **-**

23. Intervals Drilled By **Rotary Tools** **0-2108** Cable Tools _____

24. Producing Interval(s), of this completion - Top, Bottom, Name
None

25. Was Directional Survey Made
No

26. Type Electric and Other Logs Run
Induction - Electric & Gamma Ray - Acoustic

27. Was Well Cored
No

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
10-3/4	32.75	156	13-3/4	180 Sax	None

29. LINER RECORD

SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN

30. TUBING RECORD

SIZE	DEPTH SET	PACKER SET

31. Perforation Record (Interval, size and number)

DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

33. PRODUCTION

Date First Production _____ Production Method (Flowing, gas lift, pumping - Size and type pump) _____ Well Status (Prod. or Shut-in) _____

Date of Test	Hours Tested	Choke Size	Prod'n. For Test Period	Oil - Bbl.	Gas - MCF	Water - Bbl.	Gas-Oil Ratio

Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate	Oil - Bbl.	Gas - MCF	Water - Bbl.	Oil Gravity - API (Corr.)

34. Disposition of Gas (Sold, used for fuel, vented, etc.) _____ Test Witnessed By _____

35. List of Attachments _____

36. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.

SIGNED *P. J. Beelan* TITLE **Mgr. CO2 Production** DATE **3/19/71**

INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Commission not later than 20 days after the completion of any newly-drilled or deepened well. It shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, Items 30 through 34 shall be reported for each zone. The form is to be filed in quintuplicate except on state land, where six copies are required. See Rule 1105.

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

Southeastern New Mexico

Northwestern New Mexico

T. Anhy _____	T. Canyon _____	T. Ojo Alamo _____	T. Penn. "B" _____
T. Salt _____	T. Strawn _____	T. Kirtland-Fruitland _____	T. Penn. "C" _____
B. Salt _____	T. Atoka _____	T. Pictured Cliffs _____	T. Penn. "D" _____
T. Yates _____	T. Miss _____	T. Cliff House _____	T. Leadville _____
T. 7 Rivers _____	T. Devonian _____	T. Menefee _____	T. Madison _____
T. Queen _____	T. Silurian _____	T. Point Lookout _____	T. Elbert _____
T. Grayburg _____	T. Montoya _____	T. Mancos _____	T. McCracken _____
T. San Andres <u>1217</u>	T. Simpson _____	T. Gallup _____	T. Ignacio Qtzte _____
T. Glorieta <u>1449</u>	T. McKee _____	Base Greenhorn _____	T. Granite _____
T. Paddock _____	T. Ellenburger _____	T. Dakota _____	T. _____
T. Blinebry _____	T. Gr. Wash _____	T. Morrison _____	T. _____
T. Tubb _____	T. Granite _____	T. Todilto _____	T. _____
T. Drinkard _____	T. Delaware Sand _____	T. Entrada _____	T. _____
T. Abo <u>1958</u>	T. Bone Springs _____	T. Wingate _____	T. _____
T. Wolfcamp _____	T. _____	T. Chinle _____	T. _____
T. Penn. _____	T. _____	T. Permian _____	T. _____
T. Cisco (Bough C) _____	T. _____	T. Penn. "A" _____	T. _____

FORMATION RECORD (Attach additional sheets if necessary)

From	To	Thickness in Feet	Formation	From	To	Thickness in Feet	Formation
0			Chinle &				
	1217	1217	Santa Rosa SS				
1217	1449	232	San Andres				
1449			Glorieta SS &				
	1940	491	Yeso				
1940	1958	18	Anhydrite Marker				
1958	2108	150	Abo				
			DST #1 1948' - 2108'				
			Open 20 min., ISI 60 min., Flow 60 min., FSI 60 min.				
			Good blow declining to weak blow at end of test.				
			Recovered 620' of water cut mud				
			FFP 270 psi, ISIP 689 psi, FSIP 616 psi - Building				

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		<input checked="" type="checkbox"/>
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

71112 24 5118 50

5a. Indicate Type of Lease
State Fee

5. State Oil & Gas Lease No.

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. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER - Dry Hole	7. Unit Agreement Name
2. Name of Operator S. E. C. CORPORATION	8. Farm or Lease Name Mitchell
3. Address of Operator P. O. Box 37, Solano, New Mexico 87746	9. Well No. #15
4. Location of Well UNIT LETTER G , 3305 FEET FROM THE West LINE AND 1980 FEET FROM THE North LINE, SECTION 28 TOWNSHIP 18E RANGE 30 N NMPM.	10. Field and Pool, or Wildcat Wildcat
15. Elevation (Show whether DF, RT, GR, etc.) 4347 GL	12. County Harding

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 checked="" 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 checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

On 3/9/71 drilled to 156' and set 147' of 10-3/4", 32.75# casing with 180 Sax Class "C" cement. Cement circulated to surface. Drilled to 2108' on 3/13/71 to plug & abandon.

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

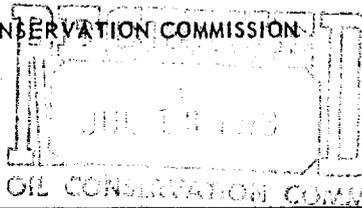
SIGNED *J. J. Beala* TITLE Mgr., CO₂ Production DATE 3/19/71

APPROVED BY *J. E. Kaptina* TITLE Oil & Gas Inspector DATE 1/23/73

CONDITIONS OF APPROVAL, IF ANY:

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		✓
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

NEW MEXICO OIL CONSERVATION COMMISSION



5a. Indicate Type of Lease
State Fee

5. State Oil & Gas Lease No.

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. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Dry Hole	7. Unit Agreement Name
2. Name of Operator S.E.C. Corporation	8. Farm or Lease Name Mitchell
3. Address of Operator P. O. Box 9737, El Paso, Texas	9. Well No. 15
4. Location of Well UNIT LETTER G 3305 FEET FROM THE West LINE AND 1980 FEET FROM THE North LINE, SECTION 28 TOWNSHIP 18N RANGE 30E NMPM.	10. Field and Pool, or Wildcat Wildcat
15. Elevation (Show whether DF, RT, GR, etc.) 4347 Ground Level	12. County Harding

16. 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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input checked="" type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Plugged and abandoned as follows:

- Spotted 5 sax cement at bottom of hole
- Spotted 25 sax cement from 95' to 145'
- Filled to surface with drilling mud
- Dumped 5 sax cement at top of surface pipe, and set 4" diameter marker above the hole. Filled in pits, cleaned and leveled location.

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

SIGNED *P. J. Beebe* TITLE Mgr. Technical Services DATE July 11, 1973

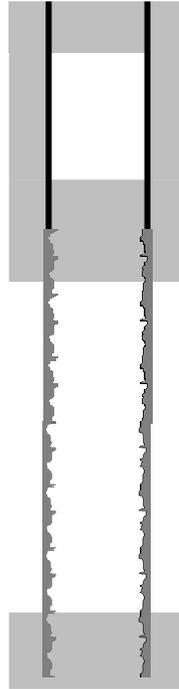
APPROVED BY *J. Kaptana* TITLE Oil & Gas Inspector DATE 7/23/73
CONDITIONS OF APPROVAL, IF ANY:

PRE-ONGARD WELL OP (214263) - Current WBD
Pre-Ongard Well #001 - Previously Mitchell #15
API No. 30-021-20015

Pumped 5sx at surface

Spotted 25sx f/ 145' to 95'

Spotted 5sx @ bottom of hole



Spud 03/09/1971

13-3/4" hole @ 2108'
10-3/4" #32.75 csg @147'
w/ 180 sx-TOC-Surf-Circ.

OH f/ 147' to 2108'

TD - 2108' TVD

vii.

VII. Attach data on the proposed operation, including:

1. Proposed average and maximum daily rate and volume of fluids to be disposed.

Average daily rate: 200BWPD

Maximum daily rate: 800BWPD

2. Whether the system open or closed.

This is a closed system.

3. Proposed average and maximum injection pressure

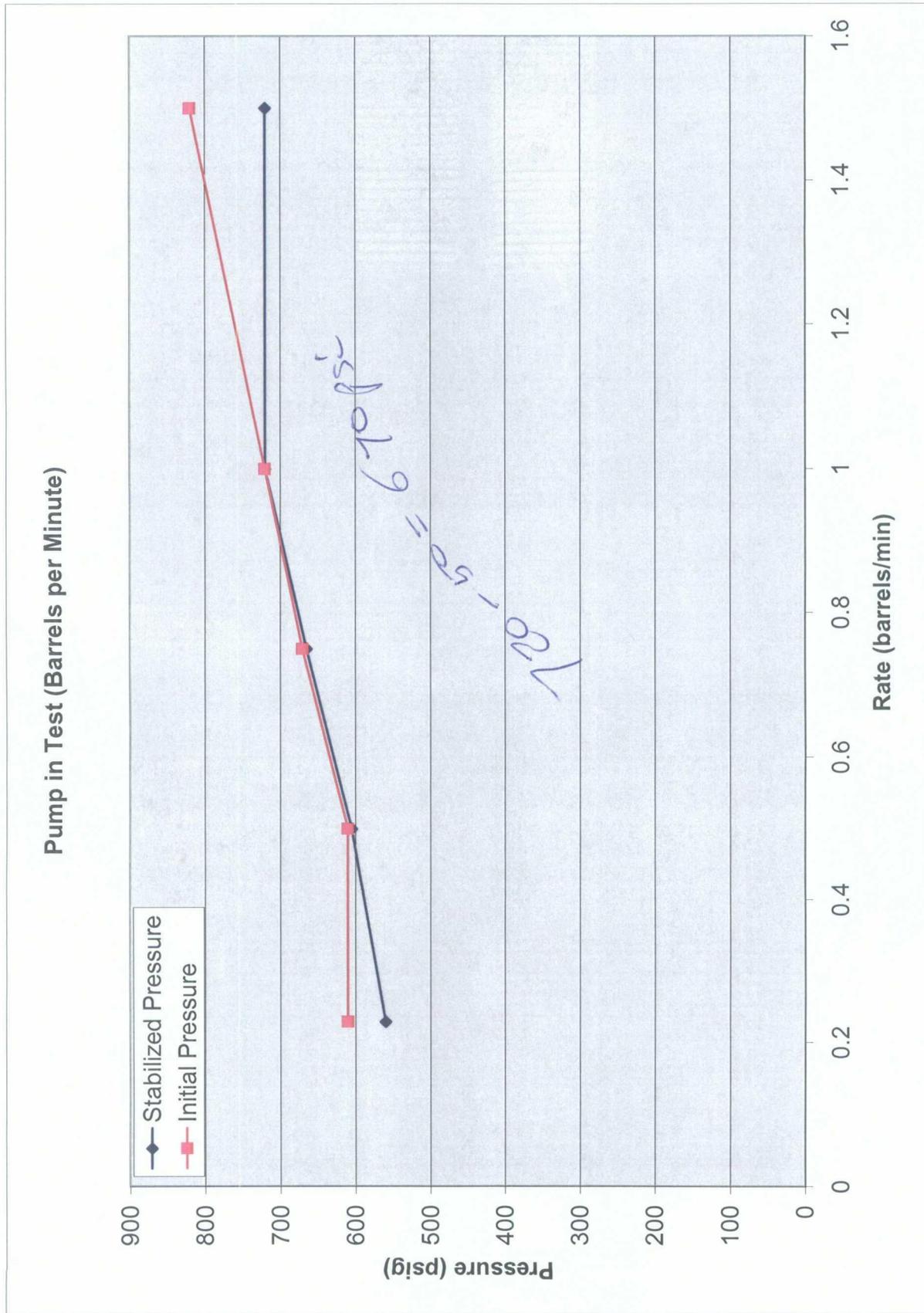
Average injection pressure: 900psig Maximum injection pressure: 1200psig

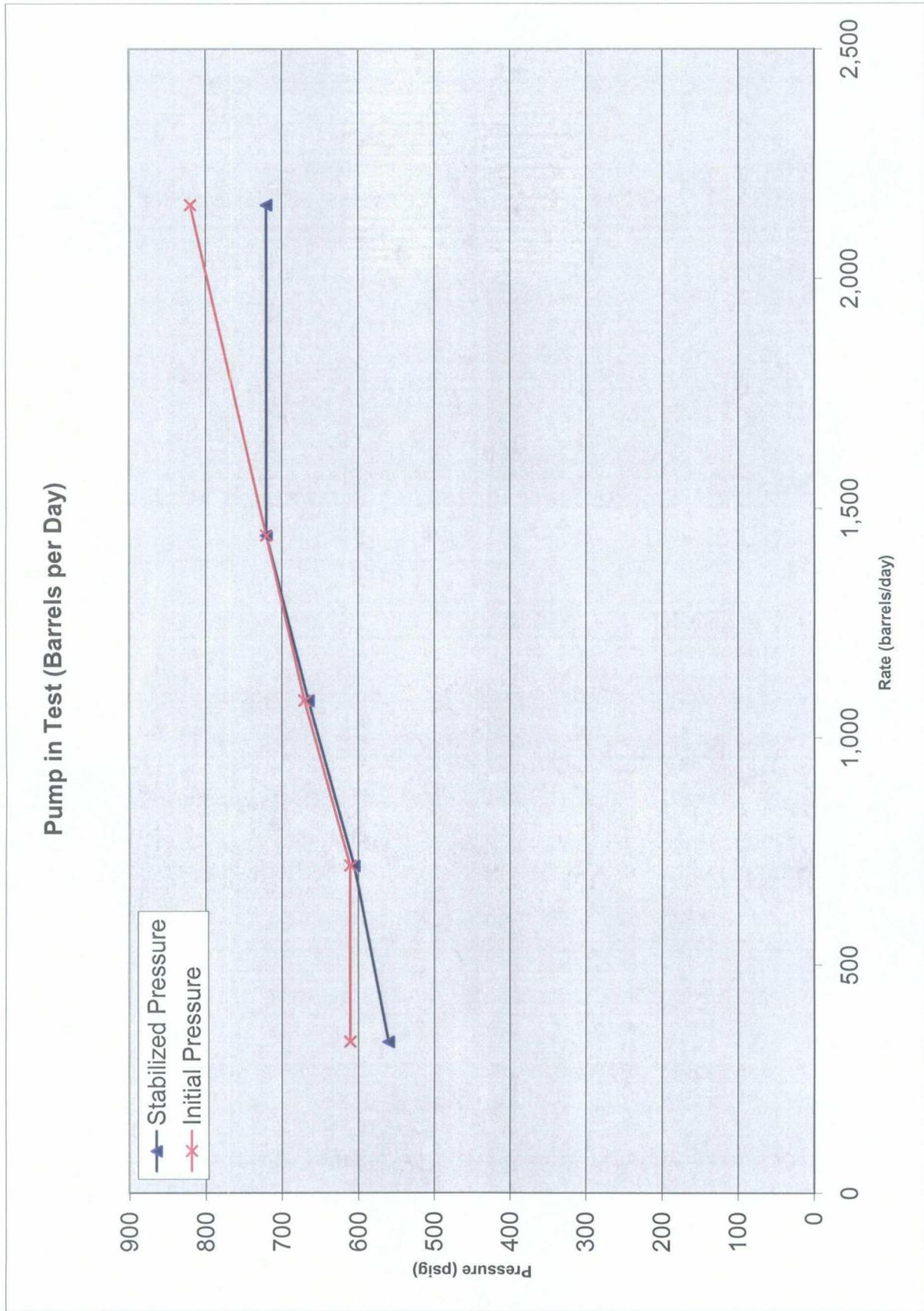
4. Sources and an appropriate analysis of injection fluid and compatibility with the receiving formation if other than reinjection produced water

See attached water analysis of the offset well. Sources of injection fluid will be Tubb formation produced water. The proposed SWD will be completed in the YESO formation so waters are compatible.

5. If injection is for disposal purposes into a zone not productive of oil or gas at or within one mile of the proposed well, attach a chemical analysis of the disposal zone formation water

See attached water analysis of the offset well. This is a representative sample of the injection fluid. Also included an analysis with a Yeso swab test.





WATER ANALYSIS WORK SHEET

Company: HESS Corporation	Lease type: State	Date: 12/02/2008
Well API NO. 30-021-20120	Lease Name: State DN (West Bravo Dome unit #001)	
Formation: TUBB	Well Number: 1	
	Pool: West Bravo Dome CO2 Gas 96387	
Unit Letter: K Section: 16	Township: 18N Range: 30E County: Harding	

Time: _____ Water Source: **WBD 1830-161K**

TOTAL DISSOLVED SOLIDS:

	Column 1 <u>mg/l as compound</u>	Column 2 <u>mg/l as ions</u>		Column 3 <u>meq/l</u>
CATIONS				
A. Sodium*	8,800	9,578 as Na+ = 23.0 X		416.4 A.
B. Total hardness, as CaCO3 =	8,800			
C. Calcium, as CaCO3 =	4,350 X 0.400 =	1,740 as Ca++ X 0.050 =		87.0 C.
D. Magnesium, as CaCO3 =	4,450 X 0.243 =	1,081 as Mg++ X 0.0823 =		89.0 D.
E. Barium, as BaSO4 =	-	-	-	0.0 E.
		Subtotal		176.0
F. Total Cations =		12,399		592.4 F.

ANIONS

G. Chloride, as NaCl =	23,723 X 0.607 =	14,400 as Cl- X 0.0282 =		406.1 G.
H. Sulfate, as Na2SO4 =	7,988 X 0.676 =	5,400 as SO4= X 0.0208 =		112.3 H.
I. Carbonate, as CaCO3 =	-	-	-	0.0 I.
J. Bicarbonate, as CaCO3* =	3,700 X 1.220 =	4,514 as HCO3- X 0.0164=		74.0 J.
K. Total Anions =		24,314		592.4 K.
L. Total Dissolved Solids		36,713		
M. Total Iron, as Fe	-	-		
N. Acidity to Phen., as CaCO3	0 X 0.440 =	-	-	

OTHER PROPERTIES:

P. Sulfide, as H2S	0	T. Turbidity	70.0
Q. Oxygen, as O2		U. Temperature, F	1.025
R. pH	6.69	V. Specific Gravity	0.25
S. Conductivity (mS/cm)	40,500	W. Resistivity	0.25
X. TDS (g/L)		(10,000 / Conduct.)	

Comments: Sample was cloudy. It filtered clear.

*Sodium calculated by meq/l difference, not analyzed

*Bicarbonate calculated from "M" alkalinity

District / Area: _____ Analyst: **H. Norton**

Directions:

Test results entered in these cells

- Step 1: Complete tests in Column 1 and "Other Properties."
- Step 2: Complete the multiplication steps for Columns 2 & 3, except A
- Step 3: In Column 3, add C, D, E to get subtotal. In Column 3, add G, H, I & J and enter total in 3K.
- Step 4: Subtract subtotal from 3K and enter difference in 3A. In Column 3, add 3A to subtotal and enter in 3F.
- Step 5: Multiply 3A by 23.0 and enter in 2A
- Step 6: Add Column 2 Cations to get Total in 2F. Add Anions to get Total in 2K. Add 2F and 2K to get 2L.

Yeso Swab Test Results

On 5/21/09 well Mitchell 1830-092F was drilled out to 1700' with fresh water and a packer was run and set below the Glorietta perforations with tailpipe to ~25' off bottom.

On 5/22/09 the well was swabbed back and samples were taken. After the calculated tubing volume and annulus volume (below packer) were swabbed back the well went dry and no more fluid was recovered. The packer was unset and re-set with the tubing within 1 foot of bottom. The well was again swabbed dry after recovering the tubing and annulus volumes. The well was left open to atmosphere for 1 hour between swab runs with all the swab attempts coming back dry. The well was then shut-in over night.

On 5/23/09 the crew arrived on location to find ~ 80psi of gas pressure on the well and bled it off. The first swab run returned less than 1 barrel of water and ~~all subsequent runs were dry.~~ At this point the crew pulled the tubing and packer from the hole and ~~re-ran the packer with out tail pipe~~ to perform a pump in test.

*Dry
interval*

All samples were field tested for chloride levels and the samples obtained on 5/22/09 were tested for TDS levels by Cardinal Laboratories in Hobbs, NM. All field chloride tests were done by titration with mercuric nitrate and titrated after one drop indicating that the chlorides were less than 1,000 mg/L. Cardinal's TDS tests are attached and show the same results of less than 1,300 mg/L of total dissolved solids. These tests along with swabbing the well dry, waiting and swabbing again seem to show that the Yeso formation will not deliver any formation water and that all fluids recovered were the fresh water that was used for drilling and well control.

As reference points the fluid recovered from the Glorietta formation during swabbing attempts in January were determined to be ~ 6,000 mg/L of total dissolved solids and produced water from the underlying Tubb formation have TDS levels ranging from 23,000 mg/L to 64,000 mg/L.



ARDINAL LABORATORIES

Test, water analysis, swab from offset
Mitchell 1830 09F (30-021-20494)

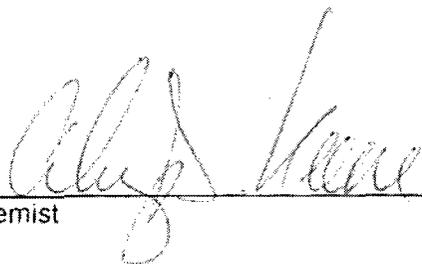
PHONE (575) 393-2326 • 101 E. MARLAND • HOBBS, NM 88240

ANALYTICAL RESULTS FOR
HESS CORPORATION
ATTN: ROBERET PONVILLE
P.O. BOX 840
SEMINOLE, TX 79360
FAX TO: (432) 758-6768

Receiving Date: 05/22/09
Reporting Date: 05/26/09
Project Number: NOT GIVEN
Project Name: SWD YESO TEST
Project Location: WEST BRAVO DOME

Sampling Date: 05/22/09
Sample Type: WASTEWATER
Sample Condition: COOL & INTACT @ 2.5°C
Sample Received By: 05/22/09
Analyzed By: HM

LAB NUMBER	SAMPLE ID	TDS (mg/L)
Analysis Date:		05/23/09
H17485-1	1	675
H17485-2	2	1,130
H17485-3	4	1,280
H17485-4	5	1,050
Quality Control		NR
True Value QC		NR
% Recovery		NR
Relative Percent Difference		0.3
METHOD: EPA 600/4-79-020		160.1



Chemist

05/26/09

Date

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CARDINAL LABORATORIES

101 East Marland, Hobbs, NM 88240
(575) 393-2326 Fax (575) 393-2476

Company Name: <u>Hess Corporation</u>		BILL TO				ANALYSIS REQUEST																
Project Manager: <u>Robert Ponville</u>		P.O. #:																				
Address: <u>100 NW 7th Street / PO Box 245</u>		Company:																				
City: <u>Seminole</u> State: <u>TX</u> Zip: <u>79560</u>		Attn: <u>Sample</u>																				
Phone #: <u>432-758-6722</u> Fax #: <u>432-758-6768</u>		Address:																				
Project #: <u>Mitchell 1830-09F</u> Project Owner: <u>Robert Ponville</u>		City:																				
Project Name: <u>SWP Yesso Test</u>		State: Zip:																				
Project Location: <u>Wyer Mine Name</u>		Phone #:																				
Sampler Name: <u>Robert Ponville</u>		Fax #:																				
FOR LAB USE ONLY		GRAB OR COMP.	# CONTAINERS	MATRIX				PRESERV.		SAMPLING		TDS										
Lab I.D.	Sample I.D.			GROUNDWATER	WASTEWATER	SOIL	OIL	SLUDGE	OTHER	ACID/BASE	ICE / COOL											OTHER
<u>H11648</u>																						
1	1										<u>5/22/01</u>											
2	2																					
3	3																					
4	4																					

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Sampler Relinquished:		Date:	Received By:		Phone Result:	<input type="checkbox"/> No	Add'l Phone #:
		Time:			Fax Result:	<input type="checkbox"/> No	Add'l Fax #:
Relinquished By:		Date:	Received By:		REMARKS: <u>email: rponville@hess.com</u> <u>rust</u>		
<u>Robert Ponville</u>		Time:	<u>Robert Ponville</u>				
Delivered By: (Circle One)		Temp.	Sample Condition				
Sampler - UPS - Bus - Other:		<u>25C</u>	Cool	Intact	CHECKED BY:		
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	(Initials)		

† Cardinal cannot accept verbal changes. Please fax written changes to 575-393-2476.

VIII.

Geologic Summary

The West Bravo Dome Unit is located in an area of low geologic risk. This carbon dioxide gas field has been producing since 2008 with no nearby hydrocarbon production. Saltwater has been disposed into the MITCHELL SWD #092F in the Yeso Formation since 2009, and in WEST BRAVO DOME UNIT SWD #271 in the Tubb Formation since 2013. Occidental would like to recomplete the WEST BRAVO DOME UNIT SWD #271, changing the injection interval from the Tubb Formation to the Yeso Formation. Faulting in the area is minimal, and it is seismically quiet with no natural or induced seismic activity. Water wells in Harding County are confined to shallow formations. All water wells in Harding County are less than 500 ft deep, more than 1000 ft above the proposed injection interval.

Overlying Zone: Glorieta

Geological Name: Glorieta

Depth: 1440 ft MD

Thickness: 110 ft MD

Lithological Detail: white, fine to medium-grain quartzose sandstone of probable shallow marine environment. Average porosity is 13%.

Source of Fresh Water: The Glorieta Formation is not a source of fresh water. (No wells in the surrounding area are using Glorieta as a fresh water source)

Hydrocarbon productivity: There are no hydrocarbons in this zone.

Injection Zone: Yeso

Geological Name: Yeso (Clearfork Group)

Depth: 1550 ft MD

Thickness: 400 ft MD

Lithological Detail: very fine to medium-grain quartzose sandstone, inter-fingering with very fine shales. Average porosity is 8%.

Source of Fresh Water: The Yeso Formation is not a source of fresh water.

Hydrocarbon productivity: There are no hydrocarbons in this zone.

Underlying Zone: Cimarron

Geological Name: Cimarron Anhydrite

Depth: 1950 ft MD

Thickness: 15 ft MD

Lithological Detail: Tight anhydrite with rare limestone and dolomite. Porosity is extremely low (less than 1%)

Source of Fresh Water: The Cimarron Formation is not a source of fresh water.

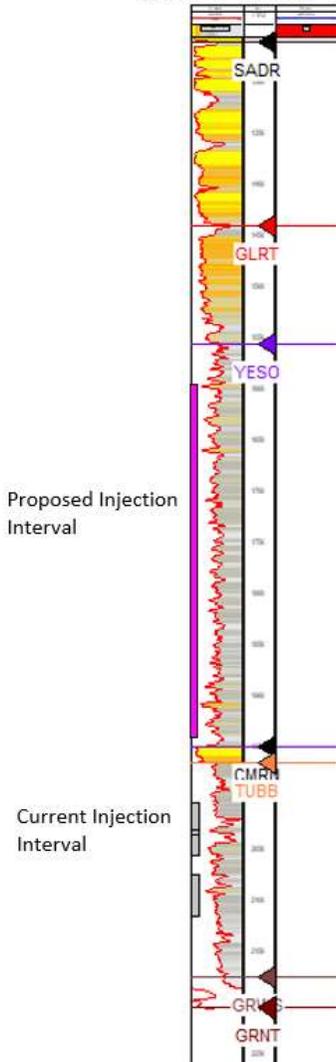
Hydrocarbon productivity: There are no hydrocarbons in this zone.

Induced Seismicity

The proposed injection well is located in an area with low seismic activity and limited basement faulting. Despite ongoing water disposal in the area, there has been no natural or induced seismic activity.

Proposed Injection Interval (1600 ft – 1940 ft)

WBDU 1830-271F



IX.

OXY USA INC. (16696)

WEST BRAVO DOME UNIT SWD #271

API: 30-021-20540

POOL: WEST BRAVO DOME CO2 GAS (96387)

STIMLUATION PLAN

The stimulation plan for this well is to perforate, install the packer and test. We will see if the well will take water naturally. If the rate is less than we anticipate, we will pump 15% Hydrochloric Acid down the tubing and into the perforations at or below the requested maximum pressure.

X.

X. Attach appropriate logging and test data on the well.

Log and well data previously submitted.

XI.

XI. Chemical analysis of fresh water

FILED WITH PREVIOUS APPLICATION SWD-1385



PHONE (575) 393-2326 ° 101 E. MARLAND ° HOBBS, NM 88240

November 13, 2012

DANNY HOLCOMB

Hess Corporation

P.O. Box 1570

Seminole, TX 79360

RE: WEST BRAVO DOME

Enclosed are the results of analyses for samples received by the laboratory on 11/02/12 16:00.

Cardinal Laboratories is accredited through Texas NELAP under certificate number T104704398-11-3. Accreditation applies to drinking water, non-potable water and solid and chemical materials. All accredited analytes are denoted by an asterisk (*). For a complete list on accredited analytes and matrices visit the TCEQ website at www.tceq.texas.gov/field/qa/lab_accred_certif.html.

Cardinal Laboratories is accredited through the State of Colorado Department of Public Health and Environment for:

Method EPA 552.2	Haloacetic Acids (HAA-5)
Method EPA 524.2	Total Trihalomethanes (TTHM)
Method EPA 524.4	Regulated VOCs (V1, V2, V3)

Accreditation applies to public drinking water matrices.

This report meets NELAP requirements and is made up of a cover page, analytical results, and a copy of the original chain-of-custody. If you have any questions concerning this report, please feel free to contact me.

Sincerely,

A handwritten signature in black ink that reads "Celey D. Keene". The signature is written in a cursive style with a large, stylized initial 'C'.

Celey D. Keene

Lab Director/Quality Manager



PHONE (575) 393-2326 ° 101 E. MARLAND ° HOBBS, NM 88240

Analytical Results For:

Hess Corporation P.O. Box 1570 Seminole TX, 79360	Project: WEST BRAVO DOME Project Number: WBD Project Manager: DANNY HOLCOMB Fax To: (432) 758-6715	Reported: 13-Nov-12 16:18
---	---	------------------------------

Sample ID	Laboratory ID	Matrix	Date Sampled	Date Received
FITZGERALD 1830-34 WINIH202684-01		Water	02-Nov-12 09:00	02-Nov-12 16:00

Cardinal Laboratories

*=Accredited Analyte

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

Hess Corporation
P.O. Box 1570
Seminole TX, 79360

Project: WEST BRAVO DOME
Project Number: WBD
Project Manager: DANNY HOLCOMB
Fax To: (432) 758-6715

Reported:
13-Nov-12 16:18

FITZGERALD 1830-34 WINDMILL
H202684-01 (Water)

Analyte	Result	Reporting Limit	Units	Dilution	Batch	Analyst	Analyzed	Method	Notes
---------	--------	-----------------	-------	----------	-------	---------	----------	--------	-------

Cardinal Laboratories**Inorganic Compounds**

Alkalinity, Bicarbonate	1330	5.00	mg/L	1	2110104	HM	12-Nov-12	310.1	
Calcium	14.4	1.60	mg/L	1	2101718	HM	13-Nov-12	SM3500Ca-D	
Alkalinity, Carbonate	320	0.00	mg/L	1	2110104	HM	12-Nov-12	310.1	
Chloride*	44.0	4.00	mg/L	1	2103007	HM	05-Nov-12	4500-Cl-B	
Conductivity*	3240	1.00	uS/cm	1	2110809	HM	08-Nov-12	120.1	
Magnesium	8.75	1.00	mg/L	1	2101718	HM	13-Nov-12	SM3500Mg-E	
pH*	8.70	0.100	pH Units	1	2110809	HM	08-Nov-12	150.1	
Potassium	4.50	1.00	mg/L	1	2101718	HM	13-Nov-12	HACH 8049	
Sodium	902	1.00	mg/L	1	2101718	HM	13-Nov-12	Calculation	
Sulfate*	339	10.0	mg/L	1	2110603	AP	06-Nov-12	375.4	
TDS*	2220	5.00	mg/L	1	2103009	HM	05-Nov-12	160.1	
Alkalinity, Total*	1650	4.00	mg/L	1	2110104	HM	12-Nov-12	310.1	

Cardinal Laboratories

* = Accredited Analyte

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

Hess Corporation P.O. Box 1570 Seminole TX, 79360	Project: WEST BRAVO DOME Project Number: WBD Project Manager: DANNY HOLCOMB Fax To: (432) 758-6715	Reported: 13-Nov-12 16:18
---	---	------------------------------

Inorganic Compounds - Quality Control
Cardinal Laboratories

Analyte	Result	Reporting Limit	Units	Spike Level	Source Result	%REC	%REC Limits	RPD	RPD Limit	Notes
---------	--------	-----------------	-------	-------------	---------------	------	-------------	-----	-----------	-------

Batch 2101718 - * DEFAULT PREP *****

Blank (2101718-BLK1) Prepared: 17-Oct-12 Analyzed: 09-Nov-12

Calcium	ND	1.60	mg/L							
Magnesium	ND	1.00	mg/L							
Potassium	ND	1.00	mg/L							

LCS (2101718-BS1) Prepared: 17-Oct-12 Analyzed: 09-Nov-12

Calcium	20.8		mg/L	20.0		104	80-120			
Magnesium	54.4		mg/L	50.0		109	80-120			
Potassium	3.00		mg/L	3.00		100	80-120			

Duplicate (2101718-DUP1) Source: H202593-01 Prepared: 17-Oct-12 Analyzed: 09-Nov-12

Calcium	6710	1.60	mg/L		6410			4.57	20	
Magnesium	1820	1.00	mg/L		1880			3.24	20	
Potassium	540	1.00	mg/L		540			0.00	20	

Batch 2103007 - General Prep - Wet Chem

Blank (2103007-BLK1) Prepared & Analyzed: 30-Oct-12

Chloride	ND	4.00	mg/L							
----------	----	------	------	--	--	--	--	--	--	--

LCS (2103007-BS1) Prepared & Analyzed: 30-Oct-12

Chloride	104	4.00	mg/L	100		104	80-120			
----------	-----	------	------	-----	--	-----	--------	--	--	--

LCS Dup (2103007-BSD1) Prepared & Analyzed: 30-Oct-12

Chloride	104	4.00	mg/L	100		104	80-120	0.00	20	
----------	-----	------	------	-----	--	-----	--------	------	----	--

Batch 2103009 - Filtration

Blank (2103009-BLK1) Prepared & Analyzed: 30-Oct-12

TDS	ND	5.00	mg/L							
-----	----	------	------	--	--	--	--	--	--	--

Cardinal Laboratories

*=Accredited Analyte

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Celey D. Keene

Celey D. Keene, Lab Director/Quality Manager



PHONE (575) 393-2326 ° 101 E. MARLAND ° HOBBS, NM 88240.

Analytical Results For:

Hess Corporation P.O. Box 1570 Seminole TX, 79360	Project: WEST BRAVO DOME Project Number: WBD Project Manager: DANNY HOLCOMB Fax To: (432) 758-6715	Reported: 13-Nov-12 16:18
---	---	------------------------------

**Inorganic Compounds - Quality Control
Cardinal Laboratories**

Analyte	Result	Reporting Limit	Units	Spike Level	Source Result	%REC	%REC Limits	RPD	RPD Limit	Notes
---------	--------	-----------------	-------	-------------	---------------	------	-------------	-----	-----------	-------

Batch 2103009 - Filtration

LCS (2103009-BS1)		Prepared & Analyzed: 30-Oct-12								
TDS	260		mg/L	240		108	80-120			
Duplicate (2103009-DUP1)		Source: H202612-05		Prepared & Analyzed: 30-Oct-12						
TDS	522	5.00	mg/L		520			0.384	20	

Batch 2110104 - General Prep - Wet Chem

Blank (2110104-BLK1)		Prepared & Analyzed: 31-Oct-12								
Alkalinity, Carbonate	ND	0.00	mg/L							
Alkalinity, Bicarbonate	ND	5.00	mg/L							
Alkalinity, Total	ND	4.00	mg/L							
LCS (2110104-BS1)		Prepared & Analyzed: 31-Oct-12								
Alkalinity, Carbonate	ND	0.00	mg/L				80-120			
Alkalinity, Bicarbonate	137	5.00	mg/L				80-120			
Alkalinity, Total	112	4.00	mg/L	100		112	80-120			
LCS Dup (2110104-BSD1)		Prepared & Analyzed: 31-Oct-12								
Alkalinity, Carbonate	ND	0.00	mg/L				80-120		20	
Alkalinity, Bicarbonate	137	5.00	mg/L				80-120	0.00	20	
Alkalinity, Total	112	4.00	mg/L	100		112	80-120	0.00	20	

Batch 2110603 - General Prep - Wet Chem

Blank (2110603-BLK1)		Prepared & Analyzed: 06-Nov-12								
Sulfate	ND	10.0	mg/L							

Cardinal Laboratories

*=Accredited Analyte

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Celey D. Keene, Lab Director/Quality Manager



PHONE (575) 393-2326 ° 101 E. MARLAND ° HOBBS, NM 88240

Analytical Results For:

Hess Corporation P.O. Box 1570 Seminole TX, 79360	Project: WEST BRAVO DOME Project Number: WBD Project Manager: DANNY HOLCOMB Fax To: (432) 758-6715	Reported: 13-Nov-12 16:18
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Inorganic Compounds - Quality Control

Cardinal Laboratories

Analyte	Result	Reporting Limit	Units	Spike Level	Source Result	%REC	%REC Limits	RPD	RPD Limit	Notes
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Batch 2110603 - General Prep - Wet Chem

LCS (2110603-BS1)		Prepared & Analyzed: 06-Nov-12								
Sulfate	18.8	10.0	mg/L	20.0		94.2	80-120			
LCS Dup (2110603-BSD1)		Prepared & Analyzed: 06-Nov-12								
Sulfate	20.7	10.0	mg/L	20.0		103	80-120	9.31	20	

Batch 2110809 - General Prep - Wet Chem

LCS (2110809-BS1)		Prepared & Analyzed: 08-Nov-12								
Conductivity	1370		uS/cm	1410		97.2	80-120			
pH	7.05		pH Units	7.00		101	90-110			
Duplicate (2110809-DUPI)		Source: H202684-01		Prepared & Analyzed: 08-Nov-12						
Conductivity	3240	1.00	uS/cm		3240			0.00	20	
pH	8.71	0.100	pH Units		8.70			0.115	20	

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Notes and Definitions

- ND Analyte NOT DETECTED at or above the reporting limit
- RPD Relative Percent Difference
- ** Samples not received at proper temperature of 6°C or below.
- *** Insufficient time to reach temperature.
- Chloride by SM4500Cl-8 does not require samples be received at or below 6°C
Samples reported on an as received basis (wet) unless otherwise noted on report

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A handwritten signature in black ink, appearing to read "Celey D. Keene", is written over a horizontal line.

Celey D. Keene, Lab Director/Quality Manager

XII.

Geological Statement

- All available geologic and engineering data have been examined. There are no wells within 0.5 miles of this well.
- There is no evidence of open faults or other hydrologic connection between the disposal zone and any underground sources of drinking water.
- No wells within the surrounding 0.5 mile are known to use the overlying Glorieta formation or the underlying Cimarron formation as a source for drinking water.

West Bravo Dome Geologist



Amanda Raddatz

West Bravo Dome Engineer



Mike Pickering

XIII.

**PROOF
OF
NOTICE**

AFFIDAVIT OF PUBLICATION

State of New Mexico
County of Union

SS.

The undersigned, being first duly sworn according to law, on her oath deposes and says that she is the office manager of the newspaper named the *Union County Leader* and that she has personal knowledge of the facts stated herein: That the said the *Union County Leader* is a weekly newspaper of general paid circulation in Union and Harding Counties published in the County of Union and State of New Mexico; entered under the second class privilege at the U.S. Post Office at Clayton, Union County, New Mexico and having been uninterruptedly and continuously so printed and published during a period of more than six months next to the date of the printing of the first publication concerning which this affidavit is made and a copy of which is hereto attached; that the said publication, a printed copy of which is hereto attached and made part of this affidavit, was published in said newspaper once each week for 3 successive weeks, and that payment for said publication has been made or assessed as part of the court costs to which it relates; said publications having been made on the following dates, to wit:

1st publication: the 11th day of June, 2021
2nd publication: the 23rd day of June, 2021

3rd publication: the 30th day of June, 2021
4th publication: the _____ day of _____, 20____

Union County Leader
Terry Martin
Terry Martin, CEO/Publisher/Editor

Publisher's Bill
_____ lines, _____ times \$ _____
11.25" lines, display 3 times \$ 117.18
Tax \$ 14.40
Total \$ 131.58

Subscribed and sworn to before me this 1st day of July, 2021.
Patricia A Herrera

Received payment:

Notary Public, Union County, New Mexico
My commission expires 11-05-2022



NOTICE OF APPLICATION FOR DISPOSAL WELL PERMIT

OXY USA Inc., PO Box 4294, Houston, TX 77210-4294 (713-366-5716) (Contact: Leslie Reeves) is applying to the State of New Mexico; Energy, Minerals and Natural Resources Department, Oil and Conservation Division for SWD (Saltwater Disposal) permit to inject fluid into a formation. The application proposes to inject the fluid into the Yeso Formation, West Bravo Dome Unit SWD No. 271. The proposed injection well is located 13 miles east of Mosquero, NM in West Bravo Dome Unit field in Harding County. Unit letter F, Section 27, Township 18 North, Range 30 East, 1650 feet from the North line and 1650 feet from the West line in Harding County New Mexico. Fluid will be injected into strata in the Yeso. The projected depth interval is 1600 feet to 1940 feet, the proposed max pressure 1200psi and max injection rate of 800bwpd.

LEGAL AUTHORITY: Requests for public hearing from Persons who can show they are adversely affected, or requests for further information concerning any aspect of the application should be submitted in writing within fifteen days of publication, to the Oil Conservation Division, 1220 South St. Francis Dr., Santa Fe, New Mexico 87505. Telephone (505)476-3441.

6-16, 23, 30



OXY USA Inc

5 Greenway Plaza, Suite 110
Houston, TX 77046-0521

June 3, 2021

CERTIFIED MAIL – RETURN RECEIPT REQUESTED # 7019 0140 0000 3887 7234

Re: ***Application for Administrative Approval of SWD
West Bravo Dome Unit SWD #271 (30-021-20540)
Surface – 230' FNL 2355' FWL Unit C Sec 6 T24S R29E
Pool: West Bravo Dome CO2 GAS (96387)
Harding County, New Mexico***

COPY

F&F Family Limited Partnership (Surface Owner)
130 Fitzgerald Lane
Mosquero, NM 87733

To Whom it May Concern,

Enclosed is a copy of an application, filed with the New Mexico Oil Conservation Division (NMOCD) by OXY USA Inc., requesting administrative approval for a saltwater disposal well, changing from the Tubb formation to the Yeso. As an affected party, notice is being provided to you pursuant to Rule 19.15.26.8 (1)(C) NMAC. and 19.15.26.8 (2)(B). The well is located as follows:

Surface – 1650' FNL 1650' FWL Unit F Sec 27 T18N R30E

If you object to this application, you must notify the Division within 15 days from the date this application was mailed. You can notify the NMOCD (1220 South St. Francis Drive, Santa Fe, NM 87505) via phone (505)476-3441.

If you need any additional information, you can contact Leslie Lusk at 713-215-7277 or myself at 713-497-2492.

Thank you,

Leslie T. Reeves
Regulatory Advisor
OXY USA Inc.



OXY USA Inc

5 Greenway Plaza, Suite 110
Houston, TX 77046-0521

June 3, 2021

CERTIFIED MAIL – RETURN RECEIPT REQUESTED #7019 0140 0000 3887 7241

Re: ***Application for Administrative Approval of SWD
West Bravo Dome Unit SWD #271 (30-021-20540)
Surface – 230' FNL 2355' FWL Unit C Sec 6 T24S R29E
Pool: West Bravo Dome CO2 GAS (96387)
Harding County, New Mexico***

COPY

NM State Land Office
PO Box 1148
Santa Fe, NM 87594
505-827-5766

To Whom it May Concern,

Enclosed is a copy of an application, filed with the New Mexico Oil Conservation Division (NMOCD) by OXY USA Inc., requesting administrative approval for a saltwater disposal well, changing from the Tubb formation to the Yeso. As an affected party, notice is being provided to you pursuant to Rule 19.15.26.8 (1)(C) NMAC. and 19.15.26.8 (2)(B). The well is located as follows:

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If you need any additional information, you can contact Bret Fugate at 713-366-5382 or myself at 713-497-2492.

Thank you,

Leslie T. Reeves
Regulatory Advisor
OXY USA Inc.