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	ation	Acronyms) 3:	WHICH REQUIRE	E PROCES	SSING AT TH	IE DIVISION L	EVEL IN SANT	A FE			SWO: blawere Mb per Bell & Cherry
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		[C]		n - Disposal - FX 🔲 PM								
		[D]	Other: S	Specify								
[2]	NOT	IFICATI [A]		UIRED TO orking, Royal				•	•	ply		·
		[B]	√ Of	fset Operator	s, Lease	holders or	· Surface C	wner				
		[C]	Ap	plication is C	ne Whi	ich Requir	es Publish	ed Legal N	otice			
		[D]	No U.S.	tification and Bureau of Land Mar	l/or Con	ncurrent Ap	pproval by of Public Lands,	BLM or SI State Land Office	LO			
		[E]	☐ Fo	r all of the ab	ove, Pro	oof of Noti	ification or	Publicatio	n is Attach	ned, and	l/or,	
		[F]	☐ Wa	nivers are Att	ached							
[3]				E AND COM NDICATED			MATION	REQUIRI	ED TO PI	ROCES	S THE	ГҮРЕ
	al is a c	c <mark>curate</mark> ar	nd <mark>compl</mark>	hereby certify ete to the bes ormation and	t of my	knowledge	e. I also u	nderstand tl	nat no act i			

Print or Type Name david_Stewart@oxy.com e-mail Address

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

STATE OF NEW MEXICO ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT

Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, New Mexico 87505

FORM C-108 Revised June 10, 2003

APPLICATION FOR AUTHORIZATION TO INJECT

I.	PURPOSE: Secondary Recovery Pressure Maintenance X Disposal Storage Application qualifies for administrative approval? X Yes No
II.	OPERATOR:
	ADDRESS: P.O. Box 50250 Midland, TX 79710
	CONTACT PARTY: David Stewart PHONE: 432-685-5717
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 X 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. Attached
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. Attached
VII.	Attach data on the proposed operation, including:
	 Proposed average and maximum daily rate and volume of fluids to be injected; Avg-2500BWPD – Max-4000BWPD Whether the system is open or closed; Closed Proposed average and maximum injection pressure; Avg-900psi – Max-990 psi Sources and an appropriate analysis of injection fluid and compatibility with the receiving formation if other than reinjected produced water; and, Delaware and Bone Spring from OXY operated leases, see attached. 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.). Attached
*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. <u>Attached</u>
IX.	Describe the proposed stimulation program, if any. To Be Determined
*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.	Logs already on file at the NMOCD 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. None within one mile per the NMSEO.
XII.	Per the field production tech, no windmills were found within one mile of this well. 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. Attached
XIII.	Applicants must complete the "Proof of Notice" section on the reverse side of this form. Attached
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:
	SIGNATURE: DATE: 41513
*	E-MAIL ADDRESS:david_stewart@oxy.com

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.

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

Proposed injection zone: 4952' -5998'

Geologic Formation: Delaware Mtn. Group; Upper Bell Canyon, Cherry Canyon

Bell Canyon Zone thickness: 930' Bell Canyon Top Depth: 4852'

Lithologic description (Bell Canyon): Interbedded arkosic to subarkosic sandstone, siltstone and limestone with occasional shale beds, average porosity about 18%

Cherry Canyon Zone thickness: 930' Cherry Canyon Top Depth: 5782'

Lithologic description (Cherry Canyon): Primarily arkosic to subarkosic sandstone and siltstone interbedded with occasional limestone and shale beds, average porosity about 16%

Our data sources indicate that neither the Upper Bell Canyon, nor the Upper Cherry canyon intervals which we are targeting in this proposed SWD well, are productive in the area.

Mark Boehm Senior Geological Advisor

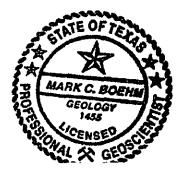
IX. Describe the proposed stimulation program, if any.

Two stage sand fracture treatment in the Bell / Cherry Canyon in the interval 4952' -5998'

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:

I have examined the available geologic and engineering data for the NBR#1 well and find no evidence of open faults or any other hydrologic connection between the disposal zone and any underground sources of drinking water.

∕Mark Boehm, Sr. Geological Advisor



INJECTION WELL DATA SHEET

OPERATOR:	OXY USA Inc.						
WELL NAME & NUMBER:	NBR #1				· 		
WELL LOCATION:198	0 FSL 1980 FEL AGE LOCATION	J UNIT LETTER	18_ SECT		22S TOWNSHI		33E RANGE
WELLBORE	<u>SCHEMATIC</u>		ROPOSED WEL		TRUCTION DA		
		Hole Size:	17-1/2"_		Casing Size:_	13-3/8"(@ 762'
		Cemented with: _	870	sx.	or	1148	ft ³
		Top of Cement: _	Surface		Method Deter	mined:C	Circ
			<u>Int</u>	ermediate	e Casing		
2		Hole Size:	12-1/4"		Casing Size:_	10-3/4"(@ 5006 <u>'</u>
		Cemented with: _	3135	sx.	or	4138	ft ³
		Top of Cement: _	Surface		Method Deter	mined: <u>C</u>	Circ
			<u>Pr</u>	oduction	Casing		
		Hole Size:	9-1/2"		Casing Size:	7-5/8" @	12066'
		Cemented with: _	2040	sx.	or	2142	ft ³
<u>Liner:</u> 6/1/4" Hole @ 15372'		Top of Cement: _	5240'		Method Deter	mined: <u>C</u>	CBL
5" liner @ 11768-15120' Cmt w/ 580sx (609cuft), TOC-1176	3'-Circ	Total Depth:	15372'				
			<u>Ir</u>	njection I	<u>nterval</u>		
		49	52	feet	to59	98	feet
			(Perforated or	Open Ho	ole; indicate whi	ch)	

INJECTION WELL DATA SHEET

Γul	ubing Size: <u>2-7/8" 6.5# J55</u> L	ining Material:			composite
$\Gamma y_{]}$	ype of Packer: Nickel Plated Arro	w Set			
Pac	acker Setting Depth: 4902'				
Otl	Other Type of Tubing/Casing Seal (if applicable):	<u>N/2</u>	<u> </u>		
	Additio	nal Data			
1.	. Is this a new well drilled for injection?	Yes	s <u> </u>	<u></u>	_No
	If no, for what purpose was the well originally	drilled?C	Sas Pro	duc	er
2.	. Name of the Injection Formation: <u>Delay</u>	vare – Bell/Cherry	Canyo	on_	
3.	. Name of Field or Pool (if applicable):	Undesignated Del	aware		
1.	. Has the well ever been perforated in any other intervals and give plugging detail, i.e. sacks o	• •	_		
	14739-14956'-7/91 CIBP @ 14725' w/ 50'cn	nt — 13921-13927'-	-12/9 <u>6</u>	CIB	P @ 13910' -
	13756-13895'-2/03 CIBP @ 13720' w/ 50' cr	nt - 2/03 CIBP @	<u>11868'</u>	w/	60sx cmt to11540' –
	11160-11184'-2/03 CIBP @ 11100' - 9898-9	920'-9/07 CIBP @	9823	,	
5.	. Give the name and depths of any oil or gas zo injection zone in this area:	2 0	_	_	1 1

OXY USA Inc. - Current NBR #1 API No. 30-025-26976



TD-15372'

17-1/2" hole @ 762' 13-3/8" csg @ 762' w/ 870sx-TOC-Surf-Circ

12-1/4" hole @ 5006' 10-3/4" csg @ 5006' w/ 3135sx-TOC-Surf-Circ

9/07-CIBP @ 9823'

2/03-CIBP @ 11100'

2/03-CIBP @ 11868' w/ 60sx cmt 11540'-Tagged

2/03-CIBP @ 13720' w/ 50' cmt

12/96-CIBP @ 13910' 7/91-CIBP @ 14725' w/ 50' cmt Perf @ 9898-9920'

Perf @ 11160-11184'

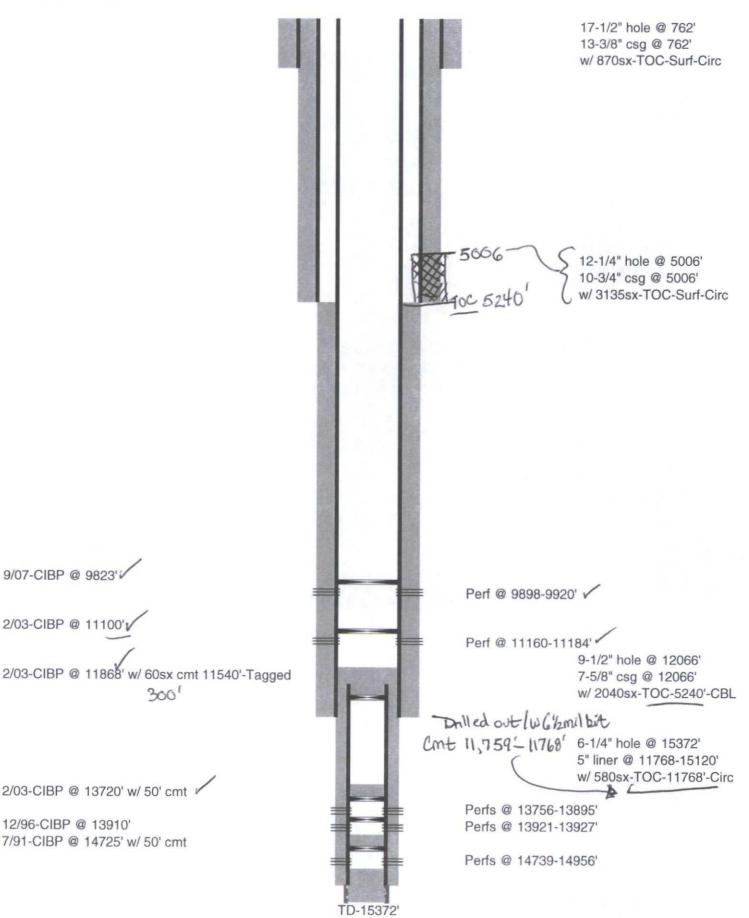
9-1/2" hole @ 12066' 7-5/8" csg @ 12066' w/ 2040sx-TOC-5240'-CBL

6-1/4" hole @ 15372' 5" liner @ 11768-15120' w/ 580sx-TOC-11768'-Circ

Perfs @ 13756-13895' Perfs @ 13921-13927'

Perfs @ 14739-14956'

OXY USA Inc. - Current NBR #1 API No. 30-025-26976



OXY USA Inc. - Proposed NBR #1 API No. 30-025-26976



TD-15372'

17-1/2" hole @ 762' 13-3/8" csg @ 762' w/ 870sx-TOC-Surf-Circ

12-1/4" hole @ 5006' 10-3/4" csg @ 5006' w/ 3135sx-TOC-Surf-Circ

Perf @ 5220' sqz 180sx cmt to 4500' Perfs @ 4952-5998'

2-7/8" 6.5# J55 compsite tbg & nickel plated Arrow Set pkr @ 4902'

CIBP @ 6863' w/ 30sx to 6763' WOC-Tag

30sx @ 8670-8570' WOC-Tag

30sx @ 9823-9723' 9/07-CIBP @ 9823'

2/03-CIBP @ 11100'

2/03-CIBP @ 11868' w/ 60sx cmt 11540'-Tagged

2/03-CIBP @ 13720' w/ 50' cmt

12/96-CIBP @ 13910' 7/91-CIBP @ 14725' w/ 50' cmt Perf @ 9898-9920'

Perf @ 11160-11184'

9-1/2" hole @ 12066' 7-5/8" csg @ 12066' w/ 2040sx-TOC-5240'-CBL

6-1/4" hole @ 15372' 5" liner @ 11768-15120' w/ 580sx-TOC-11768'-Circ

Perfs @ 13756-13895' Perfs @ 13921-13927'

Perfs @ 14739-14956'

OXY USA Inc. - Proposed NBR #1 API No. 30-025-26976

2-7/8" 6.5# J55 compsite tbg & nickel plated Arrow Set pkr @ 4902'

CIBP @ 6863' w/ 30sx to 6763' WOC-Tag

30sx @ 8670-8570' WOC-Tag

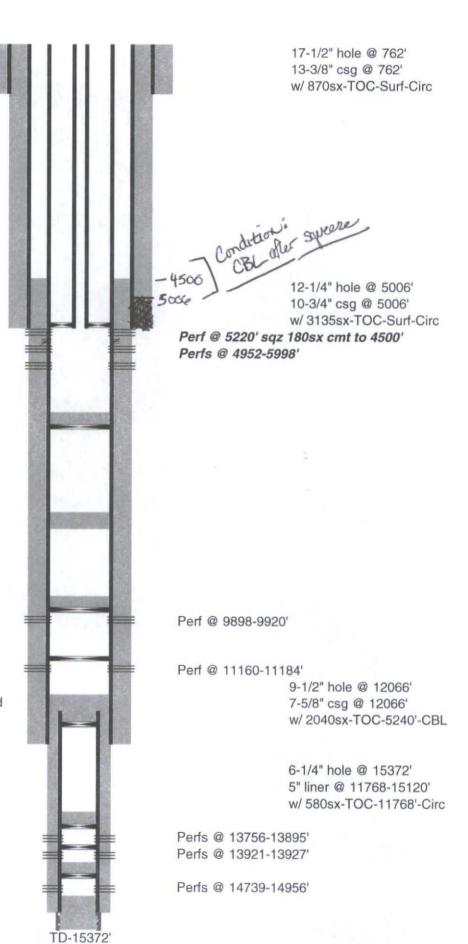
30sx @ 9823-9723' } Add cont to place 9/07-CIBP @ 9823' } Add cont to place

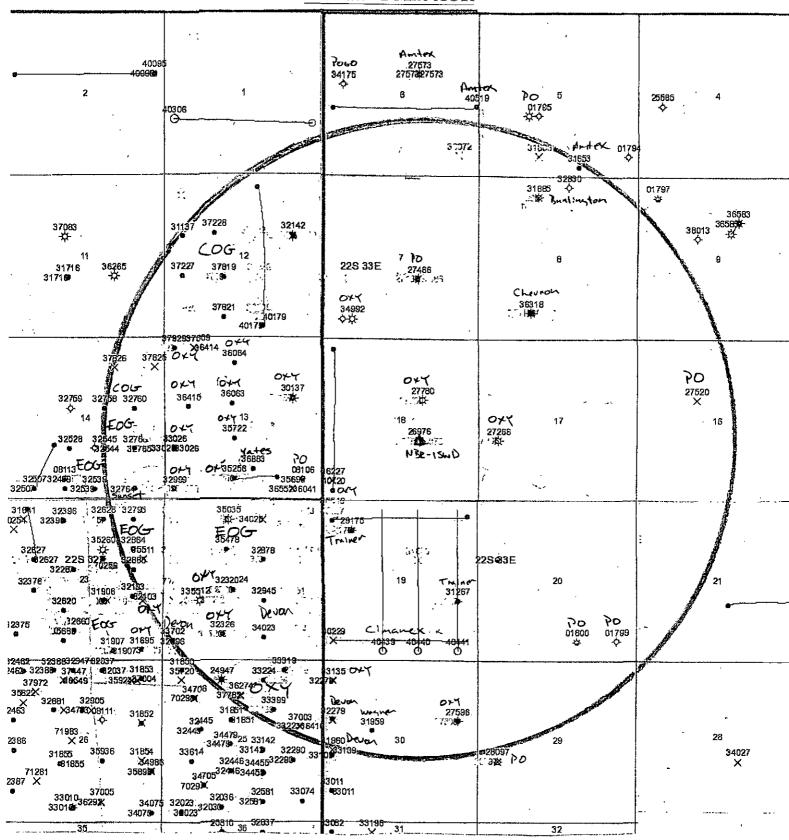
2/03-CIBP @ 11100'

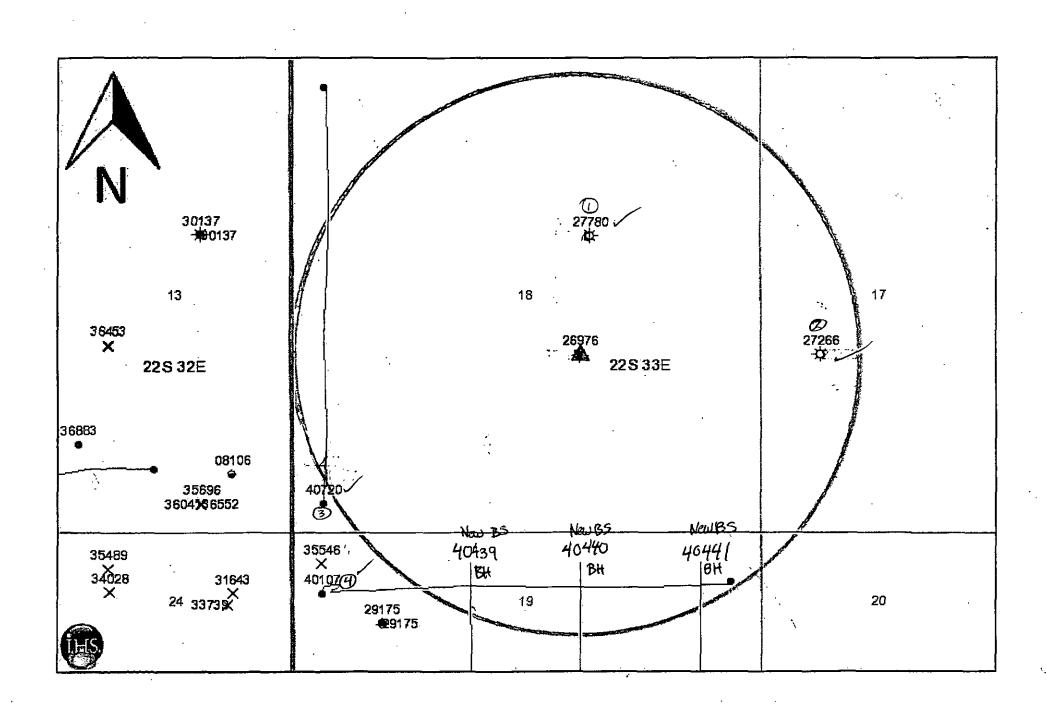
2/03-CIBP @ 11868' w/ 60sx cmt 11540'-Tagged

2/03-CIBP @ 13720' w/ 50' cmt

12/96-CIBP @ 13910' 7/91-CIBP @ 14725' w/ 50' cmt





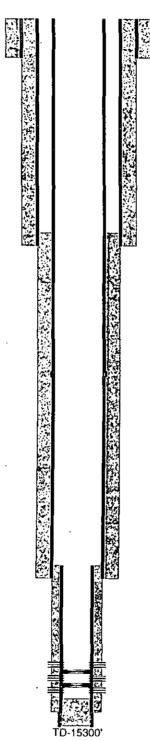


WELL API NO.

OPERATOR	7 E3 CB		API NO.	D7.30	I OGS MION	DATE	80 0	DEDEG	CACTAG CHANN	STATUS
OPERATOR	LEASE	NO.	30-	PLAT	LOCATION	DRILLED	TD	PERFS	CASING-CEMENT	SIAIUS
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	_1	ļ) .						
OXY USA Inc.	NBR	2	025-27780	1	1980 FNL 1864 FWL	4/22/82	15300	14702-14941'	13-3/8" ● 768' w/ 500sx - TOC-Surf-Circ	East Red Tank
		1		1	F-18-22S-33E		PB-9950'	9860-9890'	10-3/4 • 4751' w/ 1650sx - TOC-Surf-Circ	Bone Spring
		_		 	F-16-223-33E		FD-9950	3460-3430		-
		_					 		7-5/8* • 12201' w/ 2000sx TOC-4810'-TS	Act Oil
				!				_	5" @ 11788-15040' w/ 625sx - TOC-11788'-Circ	
	1									
										1
<u> </u>		+					 		1	Bootleg Ridge Morrow
OXY USA Inc.	Federal EBR	1	025-27266	2	1980 PSL 660 FWL	3/25/81	152701	14039-147401	13-3/8" @ 740' w/ 730sx - TOC-Surf-Circ	Bootled Ridge
					L-17-22S-33E		<u> </u>	_	10-3/4*(* 4974*)*/ 2200sx - TOC-Surf-Circ 7-5/8* * 12114* w/ 1050sx - 10C-6280* calc 5* * 11737-14813* w/ 700sx - TOC-11737*-Circ	Morrow
									7-5/8" @ 12114' w/ 1050sx - 10C-6280' Calc L	SI-Pending RC
			_						5" a 11737-14813' w/ 200ex - TOC-11737'-Circ	
<u> </u>		-					 			<u> </u>
									_	
		<u> </u>				<u> </u>	ļ			
OXY USA Inc.	NBR	3н	025-40720	3	S-340 FSL 350 FWL (M)	8/29/12	14229'M	10364-14044'	13-3/8" @ 1015' w/ 1160sx - TOC-Surf-Circ	East Red Tank
					B-342 FNL 333 FWL (D)		9905'V		9-5/8" @ 4970' w/ 2255sx - TOC-240'-TS	Bone Spring
	- 	1		i			1 3703 1		5-1/2* @ 14207' w/ 2440sx - TOC-600'CBL	
			 	 	18-22S-33E		 		5-1/2" @ 14207' W/ 24408X - TOC-600'CBL	Act Oil
		_	ļ						<u> </u>	
	j									
Cimarex Energy Co.	Merchant Livestock	114	025-40107	4	S-660 PNL 330 FWL (D)	5/15/11	15230'M	10801-15178	13-3/8" @ 1204' w/ 920sx - TOC-Surf-Circ	East Red Tank
CTRACT CALLETY CO.	Paramana Errabasan	 -::-	000 1010	 		3,23,			9-5/8 @ 4860')/ 1819sx - TOC-Surf-Circ	
ļ	-				B-536 FNL 4836 FWL (A)		10978'V			Bone Spring .
					19-22S-33B				5-1/2* @ 15230' w/ 2800sx - TOC-4145'-Calc	- Act Oil
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DATE

OXY USA Inc. - Current NBR #2 API No. 30-025-27780



17-1/2" hole @ 770' 13-3/8" csg @ 768' w/ 800sx-TOC-Surf-Circ

12-1/4" hole @ 4851' 10-3/4" csg @ 4851' w/ 1650sx-TOC-Surf-Circ

9-1/2" hole @ 12201' 7-5/8" csg @ 12201' DVT @ 7979' 1st w/ 800sx-TOC-7975'-Circ 2nd w/ 1200sx-TOC-4810'-TS

6-1/2" hole @ 15300' 5" liner @ 11788-15040' w/ 625sx-TOC-11788'-15040'

Perfs @ 14422-14426' Perfs @ 14560-14568' Perfs @ 14702-14941'

2/97-CIBP @ 14525' 2/97-CIBP @ 14675'

PB-14996'

MITCHELL ANALYTICAL LABORATORY

2638 Faudree Odessa, Texas 79765-8538 561-5579

Company:	Nalco	Comp	any					
Well Number: Lease: Location:	Red Ta OXY	nk 34 #2	? - Dela	ware		Sample Temp: Date Sampled: Sampled by:	10/5/2	012 ndmann
Date Run:	10/10/	2012				Employee #:		
Lab Ref #:	12-oct	-n67147				Analyzed by:	GR	
				Dissolved G	ases			
						Mg/L	Eq. Wt.	MEq/L
Hydrogen Sulf		(H2S)				.00	16.00	.00
Carbon Dioxide		(CO2)		NOT ANAI				
Dissolved Oxy	gen	(02)		NOT ANAL	YZED			
				Cations				
Calcium		(Ca++)				21,941.16	20.10	1,091.60
Magnesium		(Mg++)	ı			3,923.52	12.20	321.60
Sodium		(Na+)				60,922.26	23.00	2,648.79
Barium		(Ba++)		NOT ANAL	YZED			
Manganese		(Mn+)				4.73	27.50	.17
				Anions				
Hydroxyl		(OH-)				.00	17.00	.00
Carbonate		(CO3=)				.00	30.00	.00
BiCarbonate		(HCO3-)			24.44	61.10	.40
Sulfate		(SO4=)				200.00	48.80	4.10
Chloride		(CI-)				144,058.29	35.50	4,057.98
Total Iron		(Fe)				5.81	18.60	.31
Total Dissolved	d Solids	•				231,080.21		
Total Hardness	as CaC	03				70,939.33		
Conductivity M	IICROM	HOS/CM				238,000		
рН	6.140				Specif	ic Gravity 60/6	60 F.	1.161
CaSO4 Solubilit	y @ 80	F.	8.0	68MEq/L,	CaSO4	scale is unlikel	у	
CaCO3 Scale Ind	ex							
70.0		732	100.0	1.482	130.	0 2.48	82	
80.0		882	110.0	2.102	140.	0 2.48	82	
90.0	1.	482	120.0	2.102	150.	0 2.48	82	

MITCHELL ANALYTICAL LABORATORY

2638 Faudree Odessa, Texas 79765-8538 561-5579

Company:	Nalco	Comp	any					
Well Number: Lease: Location:	Cypres OXY	s 28-1 -	Bone S	Spring		Sample Temp Date Sampled Sampled by:	i: 4/29/2	2011 Summers
Date Run: Lab Ref #:	5/3/20 11-ma	11 y-n59280)			Employee #: Analyzed by:	GR	
				Dissolved C	Gases	Mg/L	Eq. Wt.	MEq/L
Hydrogen Sulfi Carbon Dioxide Dissolved Oxyg	e	(H2S) (CO2) (O2)		NOT ANA		.00	16.00	.00
				Cations				
Calcium		(Ca++)		Cunons		1,390.92	20.10	69.20
Magnesium		(Mg++)				697.84	12.20	57.20
Sodium		(Na+)				62,308.23	23.00	2,709.05
Barium		(Ba++)		NOT ANAL	YZED			
Manganese		(Mn+)				1.66	27.50	.06
				Anions				
Hydroxyl		(OH-)		11100,770,7		.00	17.00	.00
Carbonate		(CO3=)				.00	30.00	.00
BiCarbonate		(HCO3-))			391.04	61.10	6.40
Sulfate		(SO4=)				450.00	48.80	9.22
Chloride		(CI-)				100,110.00	35.50	2,820.00
Total Iron		(Fe)				2	18.60	.11
Total Dissolved				•		165,351.69		
Total Hardness						6,338.44		
Conductivity M	ITCROMI	HOS/CM				216,200		
рН	6.480				Specifi	c Gravity 60/	60 F.	1.115
CaSO4 Solubilit	у @ 80	F.	84.	.91MEq/L,	CaSO4	scale is unlike	ely	
CaCO3 Scale Inde	ex							
70.0		152	100.0	.188	130.	0	778	
80.0	(052	110.0	.488	140.	0	778	
90.0	•	188	120.0	.488	150.	0 1.:	128	

Endura Products (

P.O. Box 3394, Midland, Phone (432) 684-4233 Feb

FORM C-108 ITEM VII(5)

ANALYSIS - Injection Zone Produced Water

POGO PRODUCING COMPANY Cedar Canyon "21" Federal No. 3 Section 21, T-24S, R-29E Eddy County, New Mexico

> State New Mexico County Eddy Well #1

WATER ANAI

Date 10/10/2006 Endura Rep Norman Smil Sampling Point/Date Wellhead 10/4/2006 Company Pogo Producing Co.

5053941844

Formation Up. Delaware Lease COYOTE 21

DISSOLVED SOLIDS

CATIONS	mg/l	me/i
Sodium, Na+ (Calo.)	45,011	1,957
Total Hardness as Ca++	12,992	0
Caloium Ca++	10,856	543
Magnesium, Mg+	1,302	109
Barium, Ba++	0	0
Iron (Total) Fe+++	0	0
		4

ANIONS

_			
Chlorides, Cl-	92,500		2,606
Sulfate, SO4	100		2
Carbonate, CO3-	0		0
Bicarbonates, HCO3-	73		1
Sulfide, S-*	0		0
Total Dissolved Solid	149.842	'	

OTHER PROPERTIES

pH*	6.490
Specific Gravity,60/60 F.	1.109
Turbidity	35

SCALING INDICIES

TEMP. F	CA CO3	CASO4*2H2O	CA SO4	<u>BA \$04</u>
80	-0.0677	-1.0097	-1.2523	-29.2957
120	0.2990	-1.0209	-1.0831	-29.4961
160	0.8653	-1.0396	-0.9292	-29.7255

PERFORATIONS



New Mexico Office of the State Engineer Water Column/Average Depth to Water

(quarters are 1=NW 2=NE 3=SW 4=SE) (quarters are smallest to largest) (NAD83 UTM in meters)

No records found.

PLSS Search:

Section(s): 7, 8, 17, 18, 19, Township: 22S

Range: 33E

The data is furnished by the NMOSE/ISC and is accepted by the recipient with the expressed understanding that the OSE/ISC make no warranties, expressed or implied, concerning the accuracy, completeness, reliability, usability, or suitability for any particular purpose of the data.

3/20/13 1:29 PM

WATER COLUMN/ AVERAGE DEPTH TO WATER

Page 1 of 1



New Mexico Office of the State Engineer Water Column/Average Depth to Water

(quarters are 1=NW 2=NE 3=SW 4=SE)
(quarters are smallest to largest) (NAD83 UTM in meters)

No records found.

PLSS Search:

Section(s): 12, 13, 24

Township: 22S

Range: 32E

The data is furnished by the NMOSE/ISC and is accepted by the recipient with the expressed understanding that the OSE/ISC make no warranties, expressed or implied, concerning the accuracy, completeness, reliability, usability, or suitability for any particular purpose of the data.

WATER COLUMN/ AVERAGE DEPTH TO WATER

3/20/13 1:30 PM

Affidavit of Publication

State of New Mexico, County of Eddy, ss.

Kathy McCarroll, being first duly sworn, on oath says:

That she is the Classified Supervisor of the Current-Argus, а newspaper Carlsbad published daily at the City of Carlsbad, in said county of Eddy, state of New Mexico and of general paid circulation in said county; that the same is a duly qualified newspaper under the laws of the State wherein legal advertisements may notices and published; that the printed notice attached hereto was published in the regular and entire edition of said newspaper and not in supplement thereof on the date as follows, to wit:

March 22

2013

That the cost of publication is \$50.08 and that payment thereof has been made and will be assessed as court costs.

Subscribed and sworn to before me this

 $\frac{28}{2}$ day of $\frac{20}{2}$

2013

My commission Expires on

Notary Public

OFFICIAL SEAL
Cynthia Arredondo
NOTARY PUBLIC
STATE OF NEW MEXICO
My Commission Expires 2/17/2

March 22, 2013

Notice Of Application For Fluid Disposal

Applicant: OXY USA Inc. P.O. Box 50250 Midland, TX 79710 ATTN: David Stewart 432-685-5717

Purpose - Well:

Disposal of Produced Water Into A Zone Non Productive of Oil & Gas
NBR #1
1980 FSL 1980 FEL
NWSE(J) Sec 18 T225
R33E

Lea County, NM

Formation: Delaware Canyon 4952-5998' Bell-Cherry

Maximum Injection Rate -4000 BWPD Maximum Injection Pressure 990 psi

Interested parties must file objections or requests for hearing with the Oli Conservation Division, 1220 South St. Francis Dr., Santa Fe, New Mexico 87505 within 15 days of this application.

OFFICIAL SEAL
Cynthia Arredondo
NOTARY PUBLIC
STATE OF NEW MEXICO
My Commission Expires

C-108 Service List OXY USA Inc NBR #1

New Mexico Oil Conservation Division 1625 N. French Dr. Hobbs, NM 88240

New Mexico Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, NM 87505

Surface Owner

State Land Office P.O. Box 1148 Santa Fe, NM 87504

Offset Operators within 1/2 mile

Cimarex Energy Co. 600 N. Marienfeld ST. Ste. 600 Midland, TX 79701

OXY USA Inc. P.O. Box 50250 Midland, TX 79710

Potash Lessee(s) within 1 mile

None

Copies of this application were mailed to the following individuals, companies and organiztions on or before _________.

David Stewart OXY USA Inc.

NEER: COMPLETE THIS SECTION	CCMFLETE THIS SECTION ON DELIVERY
Complete-items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.	X Signature Agent
Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the malipiece, or on the front if space permits.	B. Received by (Printed Name) C. Date of Delivery (21241) Silvery (21813)
rticle Addressed to:	D. is deliveryaddress differing from them. It
DMOCD.	APR J 8 7013
220 SouthSt. FrancisDe.	
Santa Fe, NM B7505	3. Service Type EP Certified Med D Express Med Registered Registered C.O.D. 4. Restricted Delivery? (Extra Fee)
Article Number (Transfer from service lebel) 7811 3500	0002:4968.3779
Form 3811, February 2004 Domestic Re	turn Receipt 102595-02-M-1540 .
	A 3
ENCERTICEMPLETE THIS SECTION Complete Items 1, 2, and 3. Also complete	GCMFLI'IF THIS SECTION ON CELIVERY
Item 4 if Restricted Delivery is desired. If Print your name and address on the reverse	Addressee
so that we can return the card to you. Attach this card to the back of the malipiece,	B Received by (Printed Name) C. Date of Delivery
or on the front if space permits. Article Addressed to:	D. Is defivery address different from Item 1? Yes
	If YES, enter delivery address below: No
NMOCD LOS A Francis ()	
1625 N. French ()R. Hobbs, NM 88240	3 Service Tyres
Hobbs, NM 88240	3. Service Type It? Certified Mail
f	☐ Insured Mall ☐ C.O.D.
Article Number 2022 250	
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(Italisia itulii sarvus iaba)	0 0002 4988 3785
(ITALISTOR TICHT) SOLVICE HEAVY	Return Receipt 102595-02-44-1840
(manster front service lanel)	******
S Form 3811, February 2004 Domestic I	Return Receipt 102595-02-M-1540 COSTPUBLIE THIS SECTION ON LEUVERY A. Signeture
S Form 3811, February 2004 Domestic I NEER: CCMFLETE-THIS SECTION Complete Items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you.	COSTULETE THIS SECTION ON LEUVERY A. Signeture Addresses
SForm 3811, February 2004 Domestic I NEES: CCMFLETE THIS SECTION Complete Items 1, 2, and 3, Also complete Items 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mallpiece,	Return Receipt 102565-02-M-1840 COSTITUTE THIS SECRET ON LEGIVERY A. Signeture Agent Agent Addressee B. Received by (Printed Name) C. Date of Delivery
SForm 3811, February 2004 Domestic I NEES: CCMFLETE-THIS SECTION Complete Items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mallpiece, or on the front if space permits.	COSTULETE THIS SECTION ON LEUVERY A. Signeture Addresses
Form 3811, February 2004 Domestic NEES: COMPLETE: THIS SECTION Complete items 1, 2, and 3: Also complete items 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you: Attach this card to the back of the mallplece, or on the front if space permits. Article Addressed to:	Return Receipt 102595-02-M-1840 COSTITUTE THIS SECTION ON EBUILDEN A. Signature Addressee B. Received by (Printed Nerne) C. Date of Delivery D. Is delivery address different from item 17 Yes If YES, enter delivery address below: No
Form 3811, February 2004 Domestic Domestic Domestic Domestic Delivery Science Science Science Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mallplece, or on the front if space permits.	COSTINUE THIS SECTION ON LECUTESY A. Signeture X. Addressee B. Received by (Printed Name) C. Date of Delivery
SFORM 3811, February 2004 Domestic I NEER: CEMPLETE THIS SECTION Complete Items 1, 2, and 3. Also complete Items 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mallpiece, or on the front if space permits. Article Addressed to: Stute Land Office Proc. Box 1148	Return Receipt 102595-02-M-1840 COSTITUTE THIS SECTION ON EBUILDEN A. Signature Addressee B. Received by (Printed Nerne) C. Date of Delivery D. Is delivery address different from item 17 Yes If YES, enter delivery address below: No
Form 3811, February 2004 Domestic Interest of the Complete Items 1, 2, and 3; Also complete Items 1, 2, and 3; Also complete Items 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you: Attach this card to the back of the mallpiece, or on the front if space permits. Article Addressed to: Stute Land Office P.O. Box 1148	Return Receipt 102595-02-M-1840 COSTITUTE THIS SECTION ON EBUVESY A. Signeture Addressee Addressee Addressee B. Received by (Printed Nerne) C. Date of Delivery D. Is delivery address different from item 17 Yes If YES, enter delivery address below: No
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Form 3811, February 2004 Domestic I NEES: CCMFLETE THIS SECTION Complete Items 1, 2, and 3, Also complete Item 4 If Restricted Delivery is desired. Print your name and address on the reverse to that we can return the card to you: Attach this card to the back of the malipiece, or on the front if space permits. Article Addressed to: Funda Tee, WM Article Number 2013, 351	COSTINUE THIS SECTION ON LEGISLES A. Signeture B. Paceived by (Printed Name) C. Date of Delivery B. Paceived by (Printed Name) C. Date of Delivery B. Paceived by (Printed Name) C. Date of Delivery B. Paceived by (Printed Name) C. Date of Delivery B. Paceived by (Printed Name) C. Date of Delivery B. Paceived by (Printed Name) C. Date of Delivery B. Paceived by (Printed Name) C. Date of Delivery B. Paceived by (Printed Name) C. Date of Delivery B. Paceived by (Printed Name) C. Date of Delivery B. Paceived by (Printed Name) C. Date of Delivery C. Date of Deliver
Form 3811, February 2004 Domestic I NEES: CCMFLETE THIS SECTION Complete Items 1, 2, and 3, Also complete Item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you: Attach this card to the back of the malipiece, or on the front if space permits. Article Addressed to: Stude Could Office P.O. Box 1148 Xounta Fe, NM 67504 Article Number (Transfer from service Isbel) 7011 351	COSTITUTE THIS SECTION ON LEGISLESS A. Signature X. Addressee B. Received by (Printed Nerrie) C. Date of Delivery D. Is delivery address Delow: No If YES, enter delivery address below: No 3. Service Tipe BY Certified Mail Received Planum Receipt for Merchandise Registered Planum Receipt for Merchandise Instituted Mell C.O.D. 4. Restricted Delivery? (Extra Fee) Yes
SFORM 3811, February 2004 Domestic I NEER: CCMFLETE THIS SECTION Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mallpiece, or on the front if space permits. Article Addressed to: State Land Office P.O. Box 1148 Santa Fe, IVM 87504 Article Number (Transfer from service label) 7011 351 Form 3811, February 2004 Domestic i	COLITION FOR THIS SECTION ON LEGISLES
Form 3811, February 2004 Domestic Interest Inter	COLUMN Receipt 102595-02-M-1840 COLUMN RECEIPT THIS SECTION ON LEGISLES A Agent X Agent X Addressee B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from Item 1? Yes If YES, enter delivery address below: No 3. Service Tre BY Certified Receipt for Merchandise Registered Prefum Receipt for Merchandise Insured Mell C.O.D. 4. Restricted Delivery? (Extra Fee) Yes 10 0002 4988 3793
Form 3811, February 2004 Domestic Interpretation of the property of the prope	COMPLETE THIS SECTION ON LECTURAL A. Signature X. Addressee B. Received by (Printed Name) C. Date of Delivery D. Is delivery address below: No If YES, enter delivery address below: No 3. Service Tree BY Centified Nate Printed Receipt for Merchandise Registered Prefer Receipt for Merchandise Insured Mell C.O.D. 4. Restricted Delivery (Extra Fee) Yes 10 0002 4988 3793
Form 3811, February 2004 Domestic I Complete Items 1, 2, and 3. Also complete tem 4 if Restricted Delivery is desired. Print your name and address on the reverse to that we can return the card to you: Attach this card to the back of the mallpiece, or on the front if space permits. Print Addressed to: That Card Office Pro. Box 1148 Santa Fe, IVM 87504 Article Number (Transfer from service label) Tom 3811, February 2004 Domestic I Complete Items 1, 2, and 3. Also complete tem 4 if Restricted Delivery is desired. Print your name and address on the reverse to that we can return the card to you.	COSTINUE F THIS SECTION ON ESTURES A. Signature B. Received by (Printed Nerne) C. Date of Delivery C. Date of Delivery C. Date of Delivery D. Is delivery address Delow If YES, enter delivery address below 3. Service Dre BY Centined Nata I Requistered I Requistered I Restricted Delivery? (Extra Fee) 10. 0002 4988 3793 Return Receipt C. Date of Delivery I Yes 10. 0002 4988 3793 Return Receipt C. Date of Delivery Certra Fee) A. Restricted Delivery? (Extra Fee)
Form 3811, February 2004 Domestic Interest Inte	COSTINUED THIS SECTION ON ESTURES A. Signature B. Received by (Printed Nerne) C. Date of Delivery A. Signature C. Date of Delivery A. Signature C. Date of Delivery
SForm 3811, February 2004 Domestic Internal State of the Internal	COSTINUED THIS SECTION ON A Signature 8. Received by (Printed Nerne) 9. La delivery address different from Item 17 Yes If YES, enter delivery address below: No No 10. La delivery address below: No No No 11. Registered Papura Receipt for Merchandise Insured Mell C.O.D. 12. Restricted Delivery? (Extra Fee) Yes Yes No 13. Service Tries Receipt for Merchandise No No No No No No No N
SFORM 3811, February 2004 Domestic Interpretation of the property of the prop	COMPLETE THIS SECTION ON LELIVERY A. Signeture B. Received by (Printed Name) C. Date of Delivery Addressee B. Received by (Printed Name) C. Date of Delivery
Form 3811, February 2004 Domestic Interest Inte	COSTINUED THIS SECTION ON ENLINESY A. Signature B. Received by (Printed Nerne) C. Date of Delivery A. Restricted Delivery (Extra Fee) C. Date of Delivery C. Date of Delivery A. Report A. Report A. Report C. Date of Delivery C. Da
Form 3811, February 2004 Domestic Interpretation of the property of the prope	COSTRUCTE THIS SECTION ON LECUTESY A. Signature B. Received by (Printed Name) C. Date of Delivery C. Date of Delivery B. Received by (Printed Name) C. Date of Delivery A. Signature C. Date of Delivery A. Signature C. Date of Delivery C. Date of Deliv
SForm 3811, February 2004 Domestic Interpretation of the process of the second of the process o	COSTINUED THIS SECTION ON LECTIONS

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District 1 1625 N. French Dr., Hobbs, NM 88240 Phone: (575) 393-6161 Fax: (575) 393-0720 District II 811 S. Fixt St., Artesia, NM 88210 Phone: (575) 748-1283 Fax: (575) 748-9720 District III

Energ

State of New Mexico

Form C-101 Revised November 14, 2012

Energy Minerals and Natural Resources

Oil Conservation Division

☐AMENDED REPORT

1000 Rio Brazos Road, Aztec, NM 87410 Phone: (505) 334-6178 Fax: (505) 334-6170

District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505 1220 South St. Francis Dr.

Santa Fe, NM 87505

Phone: (505) 476		•	Þ EÐMIT T	ODDILL REJ	PNTER	DEEPEN	PLUGRAC	'K OR A	ADD A ZONE	
731.1.1.1	CATIC	NION	Operator Name a	and Address	el vi isiv	TTER, DEEPEN, PLUGBACK, OR ADD A ZONI OGRID Number 16696				
			P.O. Box 50 Midland, TX	0250			30.	* API Nu	*API Number	
* Prop	* Property Code Property N 1313								⁶ Well No.	
7. Surface Location										
UL - Loi	Section	Township	Range		et from	N/S Line	Feet From	E/W Lin		
丁	18	325	33E		<u>60 </u>	South	1980	eas	t lea	
* Proposed Bottom Hole Location UL - Lot Section Township Range Lot Idn Feet from N/S Line Feet From E/W Line County										
02-201	Section	Township	Kange	Range Lot Idn Feet fre		14/3 Line	recentom	E3 W 1511	County	
		L		9. Pool Inf	ormation	<u></u>				
		Un	designat	red Delaw	are				Pool Code	
				Additional We	ll Inform	ation		,		
	тк Туре Ъ		12. Well Type		e/Rotary		4. Lease Type 15. Ground Level Elevatio			
	<u>r</u> Iultiple		S Proposed Depth	18. Fo	rmation	on 19. Contractor		363\ 20. Spud Date		
N	0		(000عا	Delaware			TBD After Approval			
Depth to Gro	und water		Distar	nce from nearest fresh wa	ter well		Distance	to nearest su	rface water	
			21.	Proposed Casing a	nd Ceme	nt Program				
Туре	Hol	e Size	Casing Size	Casing Weight/ft		Setting Depth S		Cement	Estimated TOC	
	17'	la"	133/8"			762	8-	10	Sunt-Circ	
	1214"		103(4'	40.5-514	F	5006	313	55	Surt-Circ	
	91/2"		75/g"	26.4-29.7		12066	20'	40	5240'-CBL	
- (f :				g/Cement Program						
5 (1	ner@	11768	-15120	W 580 5X	<u>ر ۵٬۱</u> ۵	i"hole i	TOC-11	(68°-	Civc.	
			22.	Proposed Blowout	Preventi	on Program				
	Туре		Ÿ	Working Pressure		Test Press	ure		Manufacturer	
	Jouble Ram			5000		5000		<u> </u>		
Annular 3000					r	3600)				
^{23.} I hereby certify that the information given above is true and complete to the best of my knowledge and belief.						OIL CONSERVATION DIVISION				
I further certify that I have complied with 19.15.14.9 (A) NMAC and/or 19.15.14.9 (B) NMAC, if applicable. Signature:						Approved By:				
Printed name: David Stewart						Title:				
Title: Sr. Regulatory Advisor						Approved Date: Expiration Date:				
E-mail Addre	E-mail Address: david_stewart@oxy.com									
Date: 4(15(5) Phone: 432-685-5717					Condi	Conditions of Approval Attached				

District 1
1625 N, French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720
District II
311 S, First St., Artesia, NM 88210
Phone: (575) 748-1283 Fax: (575) 748-9220
District III
Phone: (505) 334-6178 Fax: (505) 334-6170
District IV

1220 S. St. Francis Dr., Santa Fe, NM 87505 Phone: (505) 476-3460 Fax: (505) 476-3462

Property Code

7 OGRID No.

16696

¹ API Number

30-025-26976

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 Number

⁹ Elevation

3631

3 Pool Name

WELL LOCATION AND ACREAGE DEDICATION PLAT

Property Name

NBR

OXY USA Inc

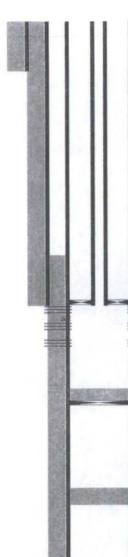
⁸ Operator Name

¹⁰ Surface Location

² Pool Code

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County	
I	18	225	33E		1980	south	1980	east	Lea	
" Bottom Hole Location If Different From Surface										
UL or let no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	Соппту	
						<u></u>				
12 Dedicated Acres	13 Joint or	· Infill	Consolidation C	Code 15 Oi	der No.					
<u> </u>				_						
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.										
16		==:			-		'7 OI	PERATOR CERT	TFICATION	
							l hereby certify	that the information contains	ed herein is true and complete	
	j						ll l	ny knowledge and belief, and t		
	ļ						ll -	z interest or unleased mineral ottom hole location or has a r		
							11		r of such a mineral or working	
							ll '	a voluntary pooling agreement	-	
								re entered by the division,		
							1/2	12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	41513	
							Signature		Date	
							Mariel	Stewart S Stewart &	Rec Ado.	
							Printed Name	- 10001- 1	Kitesivice	
	J						طين،ط	_stewante	9044.com	
							E-mail Addre	55		
			<u>. </u>				"SURV	EYOR CERT	IFICATION	
							II	ertify that the well loca		
 						1980'	plat was pi	lotted from field notes	of actual surveys	
					0	1700	II *	e or under my supervi		
1	1			1.			"	e and correct to the b	i	
				1/			Į.		, ,	
				7			Date of Surv	ev		
	1		/	'	1		11	d Seal of Professional Sur	vevor	
					·0		- Brutato ata		·-y-**	
	-				. 8 8		ŀ			
	}			}	~		#			
									}	
							Certificate Nu	ımber		

OXY USA Inc. - Proposed NBR #1 API No. 30-025-26976



TD-15372'

17-1/2" hole @ 762' 13-3/8" csg @ 762' w/ 870sx-TOC-Surf-Circ

12-1/4" hole @ 5006' 10-3/4" csg @ 5006' w/ 3135sx-TOC-Surf-Circ

Perf @ 5220' sqz 180sx cmt to 4500'

2-7/8" 6.5# J55 compsite tbg & nickel plated Arrow Set pkr @ 4902'

CIBP @ 6863' w/ 30sx to 6763' WOC-Tag

30sx @ 8670-8570' WOC-Tag

30sx @ 9823-9723' 9/07-CIBP @ 9823'

2/03-CIBP @ 11100'

2/03-CIBP @ 11868' w/ 60sx cmt 11540'-Tagged

2/03-CIBP @ 13720' w/ 50' cmt

12/96-CIBP @ 13910' 7/91-CIBP @ 14725' w/ 50' cmt Perf @ 9898-9920'

Perfs @ 4952-5998'

Perf @ 11160-11184'

9-1/2" hole @ 12066' 7-5/8" csg @ 12066' w/ 2040sx-TOC-5240'-CBL

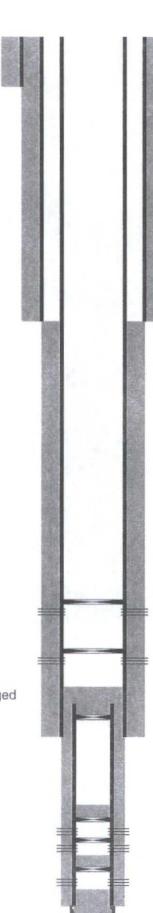
6-1/4" hole @ 15372' 5" liner @ 11768-15120' w/ 580sx-TOC-11768'-Circ

Perfs @ 13756-13895'

Perfs @ 13921-13927'

Perfs @ 14739-14956'

OXY USA Inc. - Current NBR #1 API No. 30-025-26976



TD-15372'

17-1/2" hole @ 762' 13-3/8" csg @ 762' w/ 870sx-TOC-Surf-Circ

12-1/4" hole @ 5006' 10-3/4" csg @ 5006' w/ 3135sx-TOC-Surf-Circ

9/07-CIBP @ 9823'

2/03-CIBP @ 11100'

2/03-CIBP @ 11868' w/ 60sx cmt 11540'-Tagged

2/03-CIBP @ 13720' w/ 50' cmt

12/96-CIBP @ 13910' 7/91-CIBP @ 14725' w/ 50' cmt Perf @ 9898-9920'

Perf @ 11160-11184'

9-1/2" hole @ 12066' 7-5/8" csg @ 12066' w/ 2040sx-TOC-5240'-CBL

6-1/4" hole @ 15372' 5" liner @ 11768-15120' w/ 580sx-TOC-11768'-Circ

Perfs @ 13756-13895'

Perfs @ 13921-13927'

Perfs @ 14739-14956'

NBR #1 - 30-025-26976

13/3/8" 54.5 csg @ 762' w/ 870sx, 17-1/2" hole, TOC-Surf-Circ 10-3/4" 40.5-51# csg @ 5006' w/ 3135sx, 12-1/4" hole, TOC-Surf-Circ 7-5/8" 26.4-29.7 csg @ 12066' w/ 2040sx, 9-1/2" hole, TOC-5240'-CBL 5" liner @ 11768-15120' w/ 580sx, 6-1/4" hole, TOC-11768'-Circ

- 1. MI & RU Rig. ND WH and NU BOP.
- 2. PU work string, RIH, and cap existing CIBP @ 9823' w/ 30 sx cmt.
- 3. Pull up WS and pump 30 sx cmt @ 8670' 8570'. WOC and Tag. POOH.
- 4. RUWL, RIH and set CIBP @ 6863', POOH, RDWL.
- 5. RIH w/ WS and spot 30 sx cmt on CIBP @ 6863'. POOH w/ WS.
- 6. RUWL, RIH w/WL and set CBP @ 5250'. POOH.
- 7. PU and RIH w/ perf guns and perforate for cmt squeeze @ 5220'. RD WL.
- 8. PU cmt retainer and RIH w/ WS. Set retainer above squeeze perfs @ approximately 5200'.
- 9. RU cementers.
- 10. Maintain 500 psi pressure in WS x 7 5/8" casing annulus to prevent casing collapse.
- 11. Establish circulation in 10 ¾" x 7 5/8" casing annulus through bradenhead by pumping 500 gals 15% HCl down work string followed by 300 bbls freshwater. *Do not exceed a 2400 psi (70% of collapse pressure) bottomhole pressure.*
- 12. After establishing circulation, pump 180 sx cmt down WS. *Do not exceed a 2400 psi bottomhole pressure.*
- 13. Displace cement out of WS.
- 14. POO retainer and POOH w/ WS.
- 15. With rig, DO cmt retainer @ 5200' and CBP @ 5250' and CO to PBTD @ approximately 6760'.
- 16. RU WLU and run CBL from PBTD to surface. RD WL.
- 17. Obtain engineering approval before continuing.
- 18. Pressure test casing to 4200 psi (~70% of burst 26.4# N80). RD Rig. NU Frac valve.
- 19. RUWL. PU perf guns and perforate Stage 1 @ 5641-5954'. POOH.
- 20. RU Frac crew and frac stage 1 per Halliburton frac program. Do not exceed 4200 psi in casing.
- 21. RIH w/ WL and set CBP @ 5400'. POOH.
- 22. PU perf guns, RIH, and perforate Stage 2 @ 5030-5270'. POOH. RD WL.
- 23. Frac Stage 2 per Halliburton frac program. RD Frac. Do not exceed 4200 psi in casing.
- 24. RU Rig, PU WS. Mill out CBP @ 5400' and clean out frac to PBTD. RD Rig.
- 25. Flow back well to frac tanks to clean up all perforation debris. Truck water from site for disposal at a commercial facility.
- 26. RUWL and re-perforate the entire injection interval @ 4952-5998'. POOH.
- 27. PU injection pkr and RIH w/ WL. Set injection pkr @ 4900' w/ plug in profile nipple. POOH. RD WL.
- 28. RU Rig. RIH w/ injection tubing and BHA and circulate pkr fluid.
- 29. Run an MIT pressure test on the well with a witness from the OCD. RD Rig. NU WH.
- 30. Place well on injection and report results to engineer.

WARNING: A POISONOUS GAS - HYDROGEN SULFIDE (H2S) - A HIGHLY TOXIC COLORLESS GAS THAT IS HEAVIER THAN AIR MAY BE PRESENT AT THIS LOCATION AND/OR PRESENT IN THE GAS AND LIQUIDS INJECTED OR PRODUCED FROM THIS WELL. PLANS MUST BE REVIEWED DEALING WITH H2S SAFETY PRIOR TO WORKING ON THIS WELL. CHECK WITH FOREMAN CONCERNING LOCAL CONDITIONS.

		05/23/12 -											
	Injection Permit Chec	, , ,	. (1	1	Suspended?:							
	Issued Permit: Type: WFX / F	PMX (SWD) Number: 1420 Permit Date: 05/23/13 Legacy Permits or Orders: Note											
	Well No. 1 Well Name(s): NBR												
	API : 30-0 25 - 26976 Spud Date: 08/18/80 New/Old: Old (UIC CI II Primacy March 7, 1982)												
	Footages 1980 FSL 1980 FEL Lot Unit J Sec 18 Tsp 225 Rge 33E County Lea (51683)												
	General Location:Fasts	C Wipo lis Son	Simol Pool:	CRed T	ank/BS-10st)	(51683)							
	Operator: Oxy USA Inc. Swale NW of Sal OGRID: 16696 Contact: David Stewart												
	COMPLIANCE RULE 5.9; Inactive Wells: 3 TotalWells: 1836 Fincl Assur: 185 Compl. Order? 185.9 OK? 185.9 OK?												
	Well File Reviewed: V Current Status: Well is SI with all perfs PB to 9823 CCIBB installed 2007);												
	Well Diagrams: Proposed Before Conversion After Conversion Are Elogs in Imaging?: Yes inject. interval												
	Well Diagrams: Proposed	inject. internal	_										
	Well Construction Details	Sizes (in) 3: Borehole / Pipe	Setting Depths (ft)	Stage Tool	Cement (Sx)or Cf	Cement Top and Determination Method							
	Planned _or ExistingCon	d											
	Planned _or Existing Surfac	17/2/133/8	0-762	1 2 2 1 897	870	Strulate to Suff							
	Planned_or ExistingInterr	12/4/103/4	0-5006		3135	Circulate to suf	4						
Existin	Planned_or Existing LongS	1 91/2/75/8	0-12066		2040	CBL/contat:	5240						
Perfs	Planned_or Existing Line	1 1 1	11,768-15,12	}	580	Drilling log/m	lling						
9898b	Planned Yor existing OH PER	F)	4952-5998		Completion	n/Ops Details:	0						
9920	Injection Formation(s): Depths (ft)	Drilled TD 15, 372 PBTD 15, 060										
11160	Above Top of Inject Formatio	n ~39.50	Devey lake	760	Open Hole or Tubing Size <u>278</u>	\ 	1						
to.	Above Top of Inject Formatio	!- !	Rustler (4853)		Tubing Size <u>∠ /9</u> Proposed Packer Dept								
11184	Proposed Interval TOP Proposed Interval BOTTON	1 1 2	Bell Carupa	4852	Max Packer Depth	1852 (100-ft limit)							
	Below Bottom of Inject Formation	1 2/10	Bowspilly	578Z 8661	Proposed Max. Surfac	ሳ// ላ							
13756	Below Bottom of Inject Formatic		3-0 35 20	11852	Calc. Injt Press99	(0.2 psi per ft)]						
to ubsta	17	gic and Geologic Inf	. ^		Calc. FPP	(0.65 psi per ft)]						
14956	POTASH: R-111-P NO Noticed? No BLM Sec Ord No WIPP No Noticed? No SALADO T: 978 B: CLIFF HOUSEVA												
All PB	Fresh Water: Max Depth:				? No_ HydrologicAffirm	iStatement Yes							
· Ú	Disposal Fluid: Formation Source(s) Delaware of the Gray & Bon Lease only from Operator or Commercial												
with upper	Injection Rate: 2500/4660 Pul?D Disposal Interval: Protectable Waters? No CAPITAN REEF: in/16 thru/16 outside of 155 - 500 th												
	H/C Potential: Producing Interval? N Formerly Producing? N Method: E Log /Mudlog/DST/Depleted/Other												
	AOR Wells; 1/2-M Radius Map? Well List? Total No. Wells Penetrating Interval:												
	Penetrating Wells: No. Active	Wells Num Repairs?	on which well(s)?	on which well(s)? Diagrams? N									
	Penetrating Wells: No. P&A Wells Num Repairs? On which well(s)?Diagrams?												
	NOTICE: Newspaper Date_0	3/23 Mineral Owner	rface Owner	SLO	,[
	RULE 26.7(A): Identified Trac	Affected Persons	s: Umarex 1	<u>'Oxy</u>		N. Date Off 5 13	_						
	Permit Conditions:	Added CB	L requireme	nt fo	~ squeeze	dintencel	_						
	Issues:		Page 4 of 4		SWD Cheek	ist V5.xls/ReviewersList	-						
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