

District I1625 N. French Dr., Hobbs, NM 88240
Phone:(575) 393-6161 Fax:(575) 393-0720**District II**811 S. First St., Artesia, NM 88210
Phone:(575) 748-1283 Fax:(575) 748-9720**District III**1000 Rio Brazos Rd., Aztec, NM 87410
Phone:(505) 334-6178 Fax:(505) 334-6170**District IV**1220 S. St Francis Dr., Santa Fe, NM 87505
Phone:(505) 476-3470 Fax:(505) 476-3462**State of New Mexico****Minerals and Natural Resources****Oil Conservation Division****NMOC DARTS St Francis Dr.****Santa Fe, NM 87505**Form C-103
August 1, 2011

Permit 169667

Amended

SUNDRY NOTICES AND REPORTS ON WELLS	
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVIOR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well: O	WELL API NUMBER 30-015-40434
2. Name of Operator OXY USA WTP LIMITED PARTNERSHIP	5. Indicate Type of Lease S
3. Address of Operator PO Box 4294, Houston, TX 77210	6. State Oil & Gas Lease No.
4. Well Location Unit Letter <u>I</u> : <u>2090</u> feet from the <u>S</u> line and <u>1190</u> feet from the <u>E</u> line Section <u>21</u> Township <u>17S</u> Range <u>28E</u> NMPM <u>Eddy</u> County	7. Lease Name or Unit Agreement Name PIGLET 21 STATE
	8. Well Number 019
	9. OGRID Number 192463
	10. Pool name or Wildcat
11. Elevation (Show whether DR, KB, BT, GR, etc.) 3654 GR	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>	
Pit Type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____	
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____	

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data**NOTICE OF INTENTION TO:**

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
 TEMPORARILY ABANDON ☐ CHANGE OF PLANS ☐
 PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
 Other:

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTER CASING ☐
 COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDON ☐
 CASING/CEMENT JOB ☐
 Other: **Drilling/Cement** ☒

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work.) SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

PIGLET 21 STATE #19

04/14/2013 - SPUDDED 11" SURFACE HOLE.

04/15/2013 - TD SURFACE HOLE @ 436'. RAN 8.625" J55 24# SURFACE CASING TO 436'. CEMENTED WITH 310SX 1.34YLD; NO CEMENT TO SURFACE. TAGGED TOC @ 144', PUMPED 45 SX CEMENT W/ 1".

04/16/2013 - PUMPED ADDITIONAL 50SX CEMENT W/ 1"; CIRCULATED 21SX TO SURFACE. TOC = 0'. PRESSURE TESTED SURFACE CASING @ 2065 PSI - 30 MINUTES - GOOD TEST.

04/17/2013 - BEGAN DRILLING 7.875" PRODUCTION HOLE.

04/20/2013 - TD WELL @ 4830'. BEGAN RUNNING 5.5" 17# L80 PRODUCTION CASING.

04/21/2013 - LANDED CASING @ 4830'. CEMENTED W/ 830SX 2.43 YLD; CIRCULATED 4/14/2013 Spudded well.

*PT ?***Casing and Cement Program**

Date	String	Fluid Type	Hole Size	Csg Size	Weight lb/ft	Grade	Est TOC	Dpth Set	Sacks	Yield	Class	1" Dpth	Pres Held	Pres Drop	Open Hole
04/15/13	Surf	FreshWater	11	8.625	24	j55	0	436	405	1.34			2065	0	N
04/21/13	Prod	Brine	7.875	5.5	17	l80	0	4830	830	2.43					N

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOC D guidelines ☐ a general permit ☐ or an (attached) alternative OCD-approved plan ☐

SIGNATURE *[Signature]* TITLE *Regulatory Specialist* DATE *7-8-13*
 Type or print name *Jennifer D. Anderson* E-mail address *jennifer.d.anderson@state.nm.gov* Telephone No. *713-513-6640*

For State Use Only:

APPROVED BY: *[Signature]* TITLE *Dis. & Supervision* DATE *July 9-2013*