Submit 1 Copy To Appropriate District Office	## State of New Mexico ### Interest of New Mexic		Form C-103 Revised August 1, 2011		
<u>District I</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240			WELL API NO.		
<u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210			30-015-40723 5. Indicate Type of Lea	se	
<u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410			STATE FEE		
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505			6. State Oil & Gas Lease No. BO-1969		
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			7. Lease Name or Unit Agreement Name PIGLET 21 STATE		
PROPOSALS.) 1. Type of Well: Oil Well			8. Well Number #16	8. Well Number #16	
2. Name of Operator OXY USA WTP LP			9. OGRID Number 192463		
3. Address of Operator PO BOX 4294; HOUSTON, TX 77210			10. Pool name or Wildcat ARTESIA; GLORIETA-YESO (O) - 96830		
4. Well Location					
	:_646_feet from theS lir	ne and _460	feet from theE	line	
Section 21	Township 17S Rang			nty EDDY	
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	11. Elevation (Show whether DI	R, RKB, RT, GR, etc. 600'	:.)		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data					
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:					
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WO		RING CASING	
TEMPORARILY ABANDON DULL OR ALTER CASING	<u> </u>				
DOWNHOLE COMMINGLE	·	CASING/CEME	41 20B		
OTHER:	. —	OTHER: Fi	rst Gas Sales	M	
	leted operations. (Clearly state all			<u>~</u>	
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.					
First Gas Sales: 07/29/2013					
Meter number 727917-00					
			RECE OCT 1	IVED	
			DCT 1	7 000	
			.	2013	
•			NMOCD A	RTESIA	
	,				
Spud Date:	Rig Release I	Date:			
Space Paren					
I hereby certify that the information	above is true and complete to the	best of my knowled	ge and belief.		
1 1	\	•			
SIGNATURE MM/AC	LLO TITLE_REG	ULATORY SPECI	ALIST DATE _10)-16-2013	
Type or print name _JENNIFER DU For State Use Only	ARTE E-mail address:	_jennifer_duarte@	oxy.com PHONE: _71	3-513-6640	
APPROVED BY:	ℓ TITLE \mathcal{D}_{ℓ}	157 AP SW	en DATE 10/	12/2013	
Conditions of Approval (if any):	IIILE_		DATE 10/	7.000	