

Submit 4 Copy To Appropriate District Office  
 District I - (575) 393-6161  
 1625 N. French Dr., Hobbs, NM 88240  
 District II - (575) 748-1283  
 811 S. First St., Artesia, NM 88210  
 District III - (505) 334-6178  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV - (505) 476-3460  
 1220 S. St. Francis Dr., Santa Fe, NM 87505

**NM OIL CONSERVATION**  
 State of New Mexico  
 ARTESIA DISTRICT  
 Energy, Minerals and Natural Resources  
 APR 06 2015  
**OIL CONSERVATION DIVISION**  
 RECEIVED  
 1220 South Francis Dr.  
 Santa Fe, NM 87505

Form C-103  
 Revised July 18, 2013

WELL API NO. <b>30-015-42062</b>
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. <b>VA-836</b>
7. Lease Name or Unit Agreement Name <b>Cedar Canyon 16 State</b>
8. Well Number <b>11H</b>
9. OGRID Number <b>16696</b>
10. Pool name or Wildcat <b>Cedar Canyon Delaware</b>

**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. Type of Well: Oil Well  Gas Well  Other

2. Name of Operator **OXY USA INC.**

3. Address of Operator **P.O. Box 50250 Midland, TX 79710**

4. Well Location  
 Unit Letter **C** : **260** feet from the **North** line and **2060** feet from the **West** line  
 Section **16** Township **24S** Range **29E** NMPM County **Eddy**

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
**2927' GR**

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <b>Completion</b> <input checked="" type="checkbox"/>	

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

RU WL 1/21/15, RIH & tag RBP @ 753', POOH w/ RBP, RD WL. 1/24/15 RU CTU, RIH @ Tag PBDT @ 9794', pressure test csg to 6200# for 30 min, lost 200#, good test. RIH & perf @ 9720-9487, 9367-9127, 9007-8767, 8647-8407, 8287-8047, 7927-7687; 7567-7327, 7207-6967, 6847-6607, 6487-6247, 6127-5887, 5767-5527' in 12 stages w/ 143975g Treated Water + 68221g 15% HCl acid + 962043g 15# BXL + 577677g 18# BXL + 674361g 20# BXL w/ 3500300# sand, RD Schlumberger. 2/5/15, RU CTU clean out well, drilled out 10 plugs. After drilling plug #10 while POOH w/CT, got stuck @ 8192'. Fish CT from 2/8/15 to 3/2/15 and got all of it out of hole (Details provided upon request). Drill out remaining plug. 3/10/15 RIH with 2-7/8" tbg & ESP set @ 4511', RD 3/11/15. Pump to clean up and test well for potential.

Spud Date: 12/28/14

Rig Release Date: 1/15/15

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

SIGNATURE  TITLE Regulatory Coordinator DATE 4/2/15  
 Type or print name Jana Mendiola E-mail address: jana@mendiolaoxy.com PHONE: 432-685-5936  
**For State Use Only**  
 APPROVED BY:  TITLE Dr. J. Spewison DATE 4/28/2015  
 Conditions of Approval (if any):