

Submit 1 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

State of New Mexico  
 Energy, Minerals and Natural Resources

Form C-103  
 Revised July 18, 2013

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

WELL API NO. 30-015-33030
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. V-992
7. Lease Name or Unit Agreement Name Indian Basin 32 State
8. Well Number 7
9. OGRID Number 192463
10. Pool name or Wildcat Wildcat Yeso

**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 WTP Limited Partnership

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

4. Well Location  
 Unit Letter A : 968 feet from the North line and 1218 feet from the east line  
 Section 32 Township 21S Range 24E NMPM County Eddy

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
4213'

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 checked="" 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: <input 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.

Approved for plugging of well bore only.  
 Liability under bond is retained pending receipt of C-103 (Subsequent Report of Well Plugging) which may be found at OCD Web Page under Form: www.emnrd.state.nm.us/oed.

- 10/19/2015 MIRU PU, NDWH, NU BOP
- 10/20/2015 RU ESP Spoolers, POOH w/ tbg & ESP. RIH w/ CIBP & set @ 2857'.
- 10/21/2015 RIH & tag CIBP @ 2857', circ hole w/ 10# MLF, M&P 25sx Cl C cmt, Calc TOC 2707'. PUH to 1872', M&P 40sx Cl C cmt w/ 2% CaCl2, POOH, WOC. RIH and didn't tag cmt, M&P 40sx CL C cmt @ 1872', POOH, WOC.
- 10/22/2015 RIH & tag cmt @ 1576', PUH to 1281', M&P 40sx Cl C cmt w/ 2% CaCl2, POOH, WOC. RIH & tag cmt @ 1046', PUH to 558', M&P 40sx Cl C cmt, POOH, WOC.
- 10/23/2015 RIH & tag cmt @ 300', PUH to 201', M&P 35sx CL C cmt, circ to surface. POOH, ND BOP, top off csg, RDPU.

Spud Date:

Rig Release Date:

**NM OIL CONSERVATION**  
 ARTESIA DISTRICT  
 NOV 02 2015

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

RECEIVED

SIGNATURE David Stewart TITLE Sr. Regulatory Advisor DATE 10/20/15

Type or print name David Stewart E-mail address: david.stewart@oxy.com PHONE: 432-685-5717

For State Use Only  
 APPROVED BY: [Signature] TITLE Dis. H. Expenses DATE 11/3/15

Conditions of Approval (if any):  
Submit Subsequent C-103