

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

DISTRICT II-ARTESIA O.C.D.

WELL API NO. 30-015-29930
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Coyote 21
8. Well Number 1
9. OGRID Number 16696
10. Pool name or Wildcat Cedar Canyon Delaware
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 2948'

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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator OXY USA Inc.	
3. Address of Operator P.O. Box 50250 Midland, TX 79710	
4. Well Location Unit Letter <u>LC</u> : <u>2310</u> feet from the <u>south</u> line and <u>2310</u> feet from the <u>west</u> line Section <u>21</u> Township <u>24S</u> Range <u>29E</u> NMPM County <u>Eddy</u>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 2948'	

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
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.

4/8-4/15/19

MIRU PU. POOH w/ rods & pump. NDWH, NU BOP, POOH w/ tbg. RIH & set CIBP @ 4826'. RIH w/ tbg & tag CIBP @ 4826', circ hole w/ 10# MLF, M&P 25sx CL C cmt, calc TOC-4446'. PUH to 4125', M&P 25sx CL C cmt, PUH, WOC. RIH & tag cmt @ 3720'. RIH w/ CIBP @ set @ 2920', POOH. RIH w/ tbg & tag CIBP @ 2920'. M&P 25sx CL C cmt, calc TOC-2550', POOH. RIH & perf @ 1755', POOH, RIH & set pkr @ 1323', EIR, M&P 30sx CL C cmt, PUH, WOC. RIH & tag cmt @ 1590', POOH. RIH & perf @ 690', EIR @ 2bpm @ 150#, POOH. ND BOP, NU flange, M&P 145sx CL C cmt, circ cmt to surf. Visually verify cmt to surf. RDPU

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
Forms, www.emnrd.state.nm.us/oed.

Spud Date:

Rig Release Date:

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

SIGNATURE David Stewart TITLE Sr. Regulatory Advisor DATE 5/7/19

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

For State Use Only

APPROVED BY: Staff TITLE Staff DATE 5/13/19
Conditions of Approval (if any):