

State of New Mexico
Energy, Minerals and Natural Resources Department

Michelle Lujan Grisham
Governor

Sarah Cottrell Propst
Cabinet Secretary

Todd E. Leahy, JD, PhD
Deputy Secretary

Adrienne Sandoval, Division Director
Oil Conservation Division



Notice of C-104 Denial and Request for Information

OCD denies your C-104 – *Request for Allowable and Authorization to Transport* because it is incomplete or conflicts with other information provided to OCD.

The sale or transport of product without a C-104 approved by OCD violates the Oil and Gas Act and the implementing rules, including 19.15.7.15 and 19.15.16.19 NMAC.

To avoid an enforcement action, you must submit the indicated information no later than 30 days after receipt of this notice.

Test Allowable, New Well and Recompleted Well

- ☐ C-103 (or BLM equivalent) for all casing strings
 - ☐ Spud Notice
 - ☐ Surface Casing
 - ☐ Intermediate Casing (if applicable)
 - ☐ Additional Intermediate Casing (if applicable)
 - ☐ Production Casing or Liner

☐ Applicable Order (NSL, NSP, Other _____)

☐ Deviation Survey for Vertical Wells

☐ Directional Survey

☒ C-102 (As-Drilled Plat for Horizontal Well)

New Well and Recompleted Well Only

☒ C-103 Completion Sundry (or BLM equivalent)

☒ C-105 Completion Report (or BLM equivalent)

☐ All Logs Run on Well

If you have any questions please contact the local OCD District Office

Amend C-104

30-015-45566

*Approved by BLM
copy*

Approved by BLM.

District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 S. First St., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals & Natural Resources

NM OIL CONSERVATION
ARTESIA DISTRICT

Form C-104
Revised August 1, 2011

Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

NOV 27 2019

Submit one copy to appropriate District Office

RECEIVED

☒ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address OXY USA INC. P.O. BOX 50250 MIDLAND, TX 79710		² OGRID Number 16696	
⁴ API Number 30 - 015-45566		⁵ Pool Name PIERCE CROSSING; BONE SPRING	
⁷ Property Code: 323007		⁶ Pool Code 50371	
⁸ Property Name: LENGTH CC 6-7 FEDERAL COM		⁹ Well Number: 25H	

II. ¹⁰ Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County
A	6	24S	29E		65	NORTH	1076	EAST	EDDY

¹¹ Bottom Hole Location FTP- 212' FNL 1249' FEL LTP- 127' FSL 1249' FEL

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
P	7	24S	29E		31	SOUTH	1249	EAST	EDDY
¹² Lse Code F	¹³ Producing Method Code : P		¹⁴ Gas Connection Date: 9/12/19		¹⁵ C-129 Permit Number		¹⁶ C-129 Effective Date		¹⁷ C-129 Expiration Date

III. Oil and Gas Transporters

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address	²⁰ O/G/W
214754	LPC CRUDE OIL, INC.	O
151618	ENTERPRISE FIELD SERVICES LLC	G

IV. Well Completion Data

²¹ Spud Date 3/7/19	²² Ready Date 9/12/19	²³ TD 18800'M 8514'V	²⁴ PBD 18725'M 8514'V	²⁵ Perforations 8327-18703'	²⁶ DHC, MC
²⁷ Hole Size	²⁸ Casing & Tubing Size	²⁹ Depth Set	³⁰ Sacks Cement		
17-1/2"	13-3/8"	425'	510		
9-7/8"	7-5/8"	7706'	1105		
6-3/4"	5-1/2"	18784'	883		
2-3/8" tubing		8262'			

V. Well Test Data

³¹ Date New Oil 9/12/19	³² Gas Delivery Date 9/12/19	³³ Test Date 9/21/19	³⁴ Test Length 24 HRS.	³⁵ Tbg. Pressure	³⁶ Csg. Pressure 846
³⁷ Choke Size 96/128	³⁸ Oil 3996	³⁹ Water 6248	⁴⁰ Gas 5645		⁴¹ Test Method F

⁴² I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature:

Printed name:
Jana Mendiola

Title:
Regulatory Specialist

E-mail Address:

Janalyn_mendiola@oxy.com

Date: 11/26/2019

Phone: 432-685-5936

Approved by:

Title:

Approval:

OIL CONSERVATION DIVISION

DENIED

See Attached Cover Sheet

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.

FORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 2018

5. Lease Serial No.
NMNM77018

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

8. Well Name and No.
LENGTH CC 6-7 FEDERAL COM 25H

9. API Well No.
30-015-45566

10. Field and Pool or Exploratory Area
PIERCE CROSSING; BN SPG

11. County or Parish, State
EDDY COUNTY, NM

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator
OXY USA INC.

Contact: JANA MENDIOLA
E-Mail: janalyn_mendiola@oxy.com

3a. Address
P.O. BOX 50250
MIDLAND, TX 79710

3b. Phone No. (include area code)
Ph: 432-685-5936

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Sec 6 T24S R29E Mer NMP NENE 65FNL 1076FEL
32.254027 N Lat, 104.018717 W Lon

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Hydraulic Fracturing	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other Hydraulic Fracture
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

RUPU 7/22/19, RIH & clean out to PBTD @ 18725', pressure test csg to 9800# for 30 min, good test. RIH & perf @ 18703-18527, 18505-18327, 18303-18127, 18103-17927, 17903-17727, 17703-17527, 17503-17327, 17303-17127, 17103-16927, 16903-16727, 16703-16527, 16503-16327, 16303-16127, 16103-15927, 15903-15727, 15701-15527, 15503-15327, 15303-15127, 15103-14927, 14903-14727, 14703-14527, 14503-14327, 14303-14127, 14102-13930, 13902-13730, 13527-13702, 13500-13330, 13302-13127, 13100-12930, 12902-12727, 12702-12524, 12502-12327, 12300-12130, 12102-11927, 11902-11727, 11702-11527, 11502-11327, 11303-11127, 11102-10931, 10903-10727, 10702-10530, 10502-10327, 10302-10127, 10103-9927, 9902-9731, 9702-9527, 9327-9502, 9302-9127, 9102-8927, 8903-8727, 8702-8527, 8502-8327. Total 1248 holes. Frac in 52 stages w/ 9386034g Slickwater w/ 15078829# sand, RD Schlumberger 8/19/19. 10/24/19 RIH with 2-3/8" tbg & gas lift set @ 8262', RD 10/27/19. Pump to clean up and handover well to production.

14. I hereby certify that the foregoing is true and correct.

**Electronic Submission #493900 verified by the BLM Well Information System
For OXY USA INC., sent to the Carlsbad**

Name (Printed/Typed) JANA MENDIOLA

Title REGULATORY SPECIALIST

Signature (Electronic Submission)

Date 11/26/2019

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By

Title

Date

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)

**** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ****

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NM OIL CONSERVATION
ARTESIA DISTRICT

NOV 27 2019

FORM APPROVED
OMB No. 1004-0137
Expires: July 31, 2010

WELL COMPLETION OR RECOMPLETION REPORT AND RECEIVED

5. Lease Serial No. NMNM77018
6. If Indian, Allottee or Tribe Name
7. Unit or CA Agreement Name and No.
8. Lease Name and Well No. LENGTH CC 6-7 FEDERAL COM 25H
9. API Well No. 30-015-45566
10. Field and Pool, or Exploratory PIERCE CROSSING; BN SPRG
11. Sec., T., R., M., or Block and Survey or Area Sec 6 T24S R29E Mer NMP
12. County or Parish EDDY
13. State NM
17. Elevations (DF, KB, RT, GL)* 2956 GL
22. Was well cored? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Was DST run? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Directional Survey? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (Submit analysis)

1a. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Dry <input type="checkbox"/> Other	
b. Type of Completion <input checked="" type="checkbox"/> New Well <input type="checkbox"/> Work Over <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Diff. Resvr. Other	
2. Name of Operator OXY USA INC. Contact: JANA MENDIOLA E-Mail: janalyn_mendiola@oxy.com	
3. Address P.O. BOX 50250 MIDLAND, TX 79710	3a. Phone No. (include area code) Ph: 432-685-5936
4. Location of Well (Report location clearly and in accordance with Federal requirements)* At surface NENE 65FNL 1076FEL 32.254028 N Lat, 104.018715 W Lon Sec 6 T24S R29E Mer NMP At top prod interval reported below NENE 212FNL 1249FEL 32.253630 N Lat, 104.019280 W Lon Sec 6 T24S R29E Mer NMP At total depth SESE 31FSL 1249FEL 32.225040 N Lat, 104.019380 W Lon	
14. Date Spudded 03/07/2019	15. Date T.D. Reached 06/25/2019
16. Date Completed <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod. 09/12/2019	
18. Total Depth: MD 18800 TVD 8514	19. Plug Back T.D.: MD 18725 TVD 8514
20. Depth Bridge Plug Set: MD TVD	
21. Type Electric & Other Mechanical Logs Run (Submit copy of each) GAMMA RAY	

23. Casing and Liner Record (Report all strings set in well)

Hole Size	Size/Grade	Wt. (#/ft.)	Top (MD)	Bottom (MD)	Stage Cementer Depth	No. of Sk. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
17.500	13.375 J55	54.5	0	425		510	124	0	
9.875	7.625 HCL80	26.4	0	7706		1105	434	0	
6.750	5.500 P110	20.0	0	18784		883	217	5385	

24. Tubing Record

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)
2.375		8262						

25. Producing Intervals

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) 2ND BONE SPRING	8327	18703	8327 TO 18703	0.370	1248	ACTIVE
B)						
C)						
D)						

26. Perforation Record

27. Acid, Fracture, Treatment, Cement Squeeze, Etc.

Depth Interval	Amount and Type of Material
8327 TO 18703	9386034G SLICKWATER W/ 15078829# SAND

28. Production - Interval A

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
09/12/2019	09/21/2019	24	→	3996.0	5645.0	6248.0			GAS LIFT
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
96/128	SI	846.0	→	3996	5645	6248	1413	POW	

28a. Production - Interval B

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
	SI		→						

(See Instructions and spaces for additional data on reverse side)

ELECTRONIC SUBMISSION #493887 VERIFIED BY THE BLM WELL INFORMATION SYSTEM

** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED **

28b. Production - Interval C

Date First Produced	Test Date	Hours Tested	Test Production →	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate →	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	

28c. Production - Interval D

Date First Produced	Test Date	Hours Tested	Test Production →	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate →	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	

29. Disposition of Gas(Sold, used for fuel, vented, etc.)

SOLD

30. Summary of Porous Zones (Include Aquifers):

Show all important zones of porosity and contents thereof: Cored intervals and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures and recoveries.

31. Formation (Log) Markers

Formation	Top	Bottom	Descriptions, Contents, etc.	Name	Top Meas. Depth
BELL CANYON	2829	3727	OIL, GAS, WATER	RUSTLER	300
CHERRY CANYON	3728	4917	OIL, GAS, WATER	SALADO	624
BRUSHY CANYON	4918	6498	OIL, GAS, WATER	CASTILE	1462
BONE SPRING	6499	7499	OIL, GAS, WATER	LAMAR/DELAWARE	2803
1ST BONE SPRING	7500	8310	OIL, GAS, WATER	BELL CANYON	2829
2ND BONE SPRING	8311	8514	OIL, GAS, WATER	CHERRY CANYON	3728
				BRUSHY CANYON	4918
				BONE SPRING	6499

32. Additional remarks (include plugging procedure):

52. FORMATION (LOG) MARKERS CONTD.

1ST BONE SPRING 7500' MD
2ND BONE SPRING 8311' MD

Logs were mailed 11/26/19.

Log Header, Directional Survey, As-Drilled Amended C-102 plat & WBD are attached.

33. Circle enclosed attachments:

1. Electrical/Mechanical Logs (1 full set req'd.)
5. Sundry Notice for plugging and cement verification

2. Geologic Report
6. Core Analysis

3. DST Report
4. Directional Survey
7 Other:

34. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records (see attached instructions):

Electronic Submission #493887 Verified by the BLM Well Information System.
For OXY USA INC., sent to the Carlsbad

Name (please print) JANA MENDIOLA

Title REGULATORY SPECIALIST

Signature (Electronic Submission)

Date 11/26/2019

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL **

OXY USA Inc.
Length CC 6-7 Federal Com 25H
API No. 30-015-45566

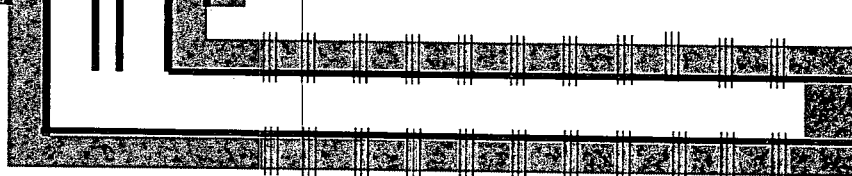


17-1/2" hole @ 435'
13-3/8" csg @ 425'
w/ 510sx-TOC-Surf Circ.

9-7/8" hole @ 7716'
7-5/8" csg @ 7706'
w/ 1105sx-TOC-Surf Circ.

6-3/4" hole @ 18800'
5-1/2" csg @ 18784'
w/ 883sx-TOC-5385'

2-3/8" tbg w/gas lift @ 8262'



Perfs @ 8327-18703'

TD- 18800'M 8514'V