Submit 3 Copies To Appropriate District Office	State of New Mexico				Form C-103			
District I :	Energy, Minerals and Natural Resources			June 19, 2008 WELL API NO.				
1625 N. French Dr., Hobbs, NM 87240 District II OIL CONSERVATION DIVISION					30-015-33349			
1301 W Grand Ave., Artesia, NM 88210 District III	UI W Grand Ave., Artesia, NM 88210					5. Indicate Type of Lease		
1000 Rio Brazos Rd , Aztec, NM 87410 Santa Fe, NM 87505 District IV					STATE X FEE			
1220 S. St. Francis Dr., Santa Fe, NM 87505					6. State Oil & Gas Lease No.			
SUNDRY NOTICES AND REPORTS ON WELLS						ame or Unit Agre	ement Name:	
(DO NOT USE THIS FORM FOR PROPOS DIFFERENT RESERVOIR. USE "APPLICA" PROPOSALS.)	OR PLUG BACK TO A		State W	ine of One Agre	ement Ivame.			
1. Type of Well:	-1 7 1-17		8. Well Nu	mber				
Oil Well X Gas Well	Other	JUN 1	8 2010	<u> </u>		7		
2. Name of Operator	!				9. OGRID Number			
OXY USA Inc 3. Address of Operator		NMOCD	ARTESIA	<u> </u>	10 Pool na	16696 me or Wildcat		
P.O. BOX 4294, HOUSTON, TX 77210					Carlsbad Delaware South			
4. Well Location								
Unit Letter N:	780 feet from	m the SOU	ITH line a	ınd	2310 f	eet from the	WEST line	
Section 3	Townsh	1		6E	NMPM	County		
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3305								
12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data								
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NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:							OF:	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING								
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				ΛENT J	-			
DOWNHOLE COMMINGLE						_		
DOVINIOLE GOIMMINGLE				т.	- — \ atatus			
OTHER:			OTHER:			be granted aft I test is perforn		
	operations (Class	rly state all no	*****			CD to schedule		
of starting any proposed work). SEE RULE 1103. For Multiple Completions: or recompletion.								
TD:12000 PBTD: 11913 Perfs:10421-475,10561-567SQZ'd 11668-86,11714-24 Propose CIBP @ 10372								
·								
OXY request TA this well to allow the installation of new surface equipment and flowline structure to accommodate the high levels of H2S gas. The purchaser will not accept this wells gas in its current condition. OXY will update/rennovate an existing central facility to accept the Stealth, State W #4, and the subject wells gas to scrub the 3 wells gas of high level H2S. OXY request the T/A for 1 year.								
the subject werrs gus to se	or up the o wer	10 guo 01 11	ign rever ne	OA	ii request i	the TA TOT I	year.	
Well will be MIT and T/A'd	per NMOCD req	uirements.	Notify NMOC	D mini	mum 24 hour	s before test	•	
Spud Date:		Rig Relea	se Date:					
I hereby certify that the information ab	ove is true and co	omplete to the	best of my kno	owledge	e and belief.		******	
SIGNATURE SIGNATURE		TIT	re Rec	gulator	ry Analyst	DATE	01/22/2010	
			Jereme_R	obinso	n@oxy.com			
Type or print name <u>Jereme Robinsor</u>	1	E-m	ail address:			PHONE _	713.366.5360	
For State Use Only	1		_	_		, _	. / /	
APPROVED BY ZUGARO	(NGE	TIT	le <u>Côm</u>	rim	re offi	DATE 6	2/22/10	
Conditions of Approval (if any):							ľ	