

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

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

REC'D NMOCD
11/19/2020

Form C-103
Revised July 18, 2013

WELL API NO. 30-015-47294	
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 COLLIE 35-34-22-27 FEE	
8. Well Number 402H	
9. OGRID Number 246289	
10. Pool name or Wildcat PURPLE SAGE, WOLFCAMP (GAS)	
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 type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other	
2. Name of Operator WPX ENERGY PERMIAN, LLC	
3. Address of Operator 3500 ONE WILLIAMS CENTER, MD: 35, TULSA, OK 74172	
4. Well Location Unit Letter A : 1369 feet from the NORTH line and 359 feet from the EAST line Section 35 Township 22S Range 27E NMPM County EDDY	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3105 RKB	

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 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: 1ST & 2ND INTERMEDIATE CASING/CEMENTING JOBS <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.

REPORTING THE 1ST AND 2ND INTERMEDIATE CASING/CEMENTING DETAILS.

1ST INTERMEDIATE INSTALLED ON 10/23/2020
DEPTH OF 12 1/4" HOLE @ 2,399' MD
DEPTH OF 9 5/8" CSG @ 2,389'
CSG WT = 40#, GRADE = J-55
17 CENTRALIZERS USED
440 SX 11.9 PPG LEAD CLASS C & 135 SX 14.8 PPG TAIL CLASS C
TOP OF CEMENT @ SURFACE
68 BBLs TO SURFACE; CSG TEST = 1500 FOR 30 MINS

2ND INTERMEDIATE INSTALLED ON 10/27/2020
DEPTH OF 8 3/4" HOLE @ 9,677' MD
DEPTH OF 7" CSG @ 9,667'
CSG WT = 29#, GRADE = VA-XP-P110
0 CENTRALIZERS USED
570 SX 11.5 PPG LEAD CLASS C & 150 SX 15.6 PPG TAIL CLASS C
TOP OF CEMENT CALC'D @ 68', NO BBLs TO SURFACE
CSG TEST = 1500 FOR 30 MINS

Spud Date:

10/21/2020

Rig Release Date:

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

SIGNATURE  TITLE REGULATORY TECH II DATE 11/09/2020

Type or print name LORRI KLINE E-mail address: LORRI.KLINE@WPXENERGY.COM PHONE: 539-573-3518

For State Use Only

APPROVED BY:  TITLE Staff Manager DATE 12/9/2020

Conditions of Approval (if any):