

Submit 1 Copy To Appropriate District Office
District I
1325 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., 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 and Natural Resources

Form C-103
October 13, 2009

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

WELL API NO. 30-015-01728
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. E-949
7. Lease Name or Unit Agreement Name Sinclair State
8. Well Number 1
9. OGRID Number 16696
10. Pool name or Wildcat Artesia Qn-GB-SA

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 M : 990 feet from the South line and 400 feet from the West line Section 35 Township 17S Range 28E NMPM County Eddy	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3674'	

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

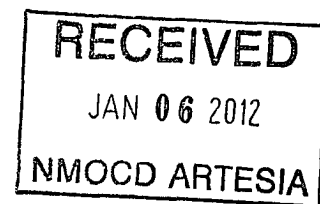
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input checked="" type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	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"/>			
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.

TD-6406' PBTD -2951' Perfs-2852-2868'

8-5/8" 24# @ 724' w/ 250sx, 11" hole, TOC-Surf-Circ
4-1/2" 9.5# csg @ 2961' w/ 175sx, 7-7/8" hole, TOC-2193'-Calc

1. RIH & Set CIBP @ 2805' spot 25sx cmt
 2. Perf @ 1600' sqz 55sx cmt to 1515' WOC-Tag
 3. Perf @ 774' sqz 100sx cmt to 615' WOC-Tag
 4. Perf @ 200' sqz 130sx cmt to Surface
- MLF between plugs



Notify OCD 24 hrs. prior to any work done.

SEE ATTACHED
CONDITIONS OF
APPROVAL

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 Regulatory Advisor DATE 1/5/12

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 Approval Granted providing work DATE 1/9/2012

Conditions of Approval (if any):

Is complete by 3/9/2012