

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

WELL API NO. 30- 015 - 30225
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name David Crockett 27 State
8. Well Number 2
9. OGRID Number 16696
10. Pool name or Wildcat Travis Upper Penn
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3574'

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"/>	RECEIVED SEP 16 2013 NMOCD ARTESIA
2. Name of Operator OXY USA Inc.	
3. Address of Operator P.O. Box 50250 Midland, TX 79710	
4. Well Location Unit Letter F : 1980 feet from the north line and 1330 feet from the west line Section 27 Township 18S Range 28E NMPM County Eddy	

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>
DOWNHOLE COMMINGLE <input type="checkbox"/>	
CLOSED-LOOP SYSTEM <input type="checkbox"/>	
OTHER: <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input checked="" type="checkbox"/>
CASING/CEMENT JOB <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.

9/3/13 MIRU, NDWH, NU BOP, work to rel pkr & tbq
9/4/13 Wrk pkr, rel on/off, let equalize, rel pkr, POOH w/ pkr & tbq. RIH w/ CIBP.
9/5/13 Continue to RIH w/ CIBP & set CIBP @ 9124', circ hole w/ 10# MLF, M&P 30sx CL H cmt, calc TOC 8693'. PUH to 8351', M&P 40sx CL H cmt, PUH, WOC. RIH & tag cmt @ 8145'. PUH to 6897', M&P 40sx CL H cmt, PUH, WOC.
9/6/13 RIH & tag cmt @ 6650', PUH to 6216', M&P 40sx CL C cmt w/ 2% CaCl2, PUH, WOC. RIH & tag cmt @ 5970', PUH to 3711', M&P 40sx CL C cmt w/ 2% CaCl2, PUH, WOC. RIH & tag cmt @ 3470', PUH to 3031', M&P 40sx cmt w/ 2% CaCl2, POOH, WOC.
9/9/13 RIH & tag cmt @ 2782', POOH. RIH w/ WL & perf @ 2240', POOH. RIH & set pkr @ 1794', pressure test perfs to 1150#, no rate, no loss, POOH w/ pkr, RIH w/ tbq to 2288', M&P 40sx CL C cmt, PUH, WOC.
9/10/13 RIH & tag cmt @ 1990', POOH. RIH w/ WL & perf @ 1750', POOH. RIH & set pkr @ 1488', pressure test perfs to 1250#, no rate, no loss. POOH w/ pkr. RIH w/ tbq to 1824', M&P 40sx CL C cmt w/ 2% CaCl2, POOH, WOC. RIH w/ WL & tag cmt @ 1595', PUH & perf @ 493', POOH. RIH & set pkr @ 30', EIR @ 2BPM w/ full returns. POOH w/ pkr, ND BOP, M&P 155sx CL C cmt, circ to surface. RDPU.

Spud Date:

File Current C103 P&A
for final inspection

Rig Release Date:

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.

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 9/11/13

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

For State Use Only

APPROVED BY: David Stewart TITLE Dist. II Supervisor DATE 9/17/2013

Conditions of Approval (if any):

* Submit Subsequent C-103