

Office

Minerals and Natural Resources

Revised July 18, 2013

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 Dr., Aztec, NM 87410

District IV - (505) 476-3460

1220 S. St. Francis Dr., Santa Fe, NM 87505

NM OIL CONSERVATION DIVISION

ARTESIA DISTRICT

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

FEB 26 2015

RECEIVED

WELL API NO. 30-015-42931
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 Devon 6 Fee
8. Well Number 211
9. OGRID Number 157984
10. Pool name or Wildcat Willow Lake Bone Spring
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3042'

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 Gas Well Other

2. Name of Operator
Occidental Permian Limited Partnership

3. Address of Operator
P.O. Box 50250 Midland, TX 79710

4. Well Location
Unit Letter H : 1930 feet from the north line and 300 feet from the east line
Section 6 Township 25S Range 28E NMPM County Eddy

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 checked="" type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input checked="" type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <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.

Spud 13-1/2" hole 2/19/15, drill to 554' 2/19/15. RIH & set 10-5/8" 45.5# J-55 BTC csg @ 554', pump 30BFW spacer w/ red dye then cmt w/ 360sx (86bbl) PPC w/ additives 14.8ppg 1.342 yield, had full returns, circ 167sx (40bbl) cmt to surface. 2/20/15-Install WH, test to 1460#, RU BOP, test @ 250# low 5000# high, and test csg to 2506# for 30 min, good test. RIH & tag cmt @ 511', drill new formation to 564', perform FIT test to EMW=13.5ppg, 98psi good test.

2/20/15 drill 9-7/8" hole to 2513', 2/21/15. RIH & set 7-5/8" 29.7# L80 BTC csg @ 2501', pump 20bbl FW spacer w/ red dye then cmt w/ 430sx (144bbl) Light PPC w/ additives 12.9ppg 1.874 yield followed by 230sx (54bbl) PPC w/ additives 14.8ppg 1.326 yield, had full returns, circ 171sx (56bbl) cmt to surface, WOC. Install pack-off bushing, test to 5000# for 15min, good test. 2/23/14, RIH & tag cmt @ 2458', pressure test csg to 4820# for 30 min, good test. Drill new formation to 2523', perform FIT test EMW=11ppg, 250psi, good test.

Spud Date:

2/19/15

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

Sr. Regulatory Advisor

DATE

2/24/15

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. Reg. Supervisor

DATE

2/26/2015

Conditions of Approval (if any):