| Submit One Copy To Appropriate District   | State of New Mexico                                     |   | Form C-103                               |                            |
|---|---|---|--|----------------------------|
| Office<br>District 1  | Energy, Minerals and Natural Resources                  |   | Revised November 3, 2011                 |                            |
| 1625 N. French Dr., Hobbs, NM 88240<br>District II  |   |   | WELL API NO. 30-015-27235                |                            |
| 811 S. First St., Artesia, NM 88210<br>District III   | OIL CONSERVATION DIVISION<br>1220 South St. Francis Dr. |   | 5. Indicate Type                         |                            |
| 1000 Rio Brazos Rd., Aztec, NM 87410  | Santa Fe, NM 87505                                      |   | STATE 6. State Oil & Ga                  |                            |
| istrict IV<br>220 S. St. Francis Dr., Santa Fe, NM<br>7505  |   | E-10083                                       | is Lease No.                             |                            |
| SUNDRY NOTICES AND REPORTS ON WELLS   |   |   |  | r Unit Agreement Name      |
| (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A<br>DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH<br>PROPOSALS.)   |   |   | INDIAN HILLS STATE COM<br>8. Well Number |                            |
| 1. Type of Well: Oil Well Gas Well Other  |   |   | 4  |                            |
| 2. Name of Operator<br>OXY USA WTP LP   |   |   | 9. OGRID Number<br>192463                |                            |
| 3. Address of Operator<br>PO BOX 4294; HOUSTON, TX 77210  |   | 10. Pool name or Wildcat<br>CEMETARY WOLFCAMP |  |                            |
| 4. Well Location  | *****   |   |  |                            |
| Unit Letter <u>E</u> : 1880 feet  | from the <u>NORTH</u> line and <u>660</u> fee           | et from the <u>WEST</u> li                    | ne                                       |                            |
| Section <u>36</u> Township <u>20S</u> Range <u>24E</u> NMPM <u>County EDDY</u>  |   |   |  |                            |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)<br>3634'   |   |   |  |                            |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data  |   |   |  |                            |
| NOTICE OF INT   |   |   | SEQUENT RE                               |                            |
|   |   |   |  |                            |
|   | CHANGE PLANS  | IGE PLANS COMMENCE DRILLING OPNS. P AND A     |  |                            |
| PULL OR ALTER CASING  MULTIPLE COMPL CASING/CEMEN CASING/CEMEN  |   |   | ЈОВ 🗌                                    |                            |
| OTHER: 🔲 🛛 Location is re   |   |   | ady for OCD insp                         | ection after P&A           |
| All pits have been remediated in o  |   | he terms of the Oper                          | ator's pit permit an                     | d closure plan.            |
| <ul> <li>Rat hole and cellar have been filled and leveled. Cathodic protection holes have been properly abandoned.</li> <li>A steel marker at least 4" in diameter and at least 4' above ground level has been set in concrete. It shows the</li> </ul> |   |   |  |                            |
|   | cici and acicast 4° above ground i                      | ever has been set ht                          | concrete. It shows                       |                            |
| OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, OUARTER/OUARTER LOCATION OR   |   |   |  |                            |
| UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATION HAS BEEN WELDED OR<br>PERMANENTLY STAMPED ON THE MARKER'S SURFACE.   |   |   |  |                            |
|   |   |   |  |                            |
| The location has been leveled as nearly as possible to original ground contour and has been cleared of all junk, trash, flow lines and other production equipment.  |   |   |  |                            |
| Anchors, dead men, tie downs and risers have been cut off at least two feet below ground level.   |   |   |  |                            |
| If this is a one-well lease or last remaining well on lease, the battery and pit location(s) have been remediated in compliance with  |   |   |  |                            |
| OCD rules and the terms of the Operator's pit permit and closure plan. All flow lines, production equipment and junk have been removed from lease and well location,  |   |   |  |                            |
| All metal bolts and other materials have been removed. Portable bases have been removed. (Poured onsite concrete bases do not have  |   |   |  |                            |
| to be removed.)   |   |   |  |                            |
| <ul> <li>All other environmental concerns have been addressed as per OCD rules.</li> <li>Pipelines and flow lines have been abandoned in accordance with 19.15.35.10 NMAC. All fluids have been removed from non-</li> </ul>                            |   |   |  |                            |
| retrieved flow lines and pipelines.   |   |   |  |                            |
| If this is a one-well lease or last r   | emaining well on lease: all electri                     | cal service poles and                         | d lines have been re                     | emoved from lease and well |
| ocation, except for utility's distribution  | on infrastructure.                                      |   |  |                            |
| When all work has been completed, return this form to the appropriate District office to schedule an inspection.  |   |   |  |                            |
|   | TITLE   | ENVIRONMENTA                                  | L ADVISORDA                              | те <u> 12-21-</u> 16       |
| TYPE OR PRINT NAME _CASEY L SUMMERS E-MAIL: <u>casey_summers@oxy.com</u> PHONE: _575-513-8289   |   |   |  |                            |
| For State Use Only<br>APPROVED BY: Lafue 2 by   | rel TITLE /   | ompliance c                                   | FREEA                                    | DATE 12/22/16              |
| Conditions of Approval (if any):  | anner an            | ***************************************       |  |                            |