

State of New Mexico
Energy, Minerals and Natural Resources Department

Michelle Lujan Grisham
Governor

Sarah Cottrell Propst
Cabinet Secretary

Todd E. Leahy, JD, PhD
Deputy Secretary

Adrienne Sandoval, Division Director
Oil Conservation Division



Notice of C-104 Denial and Request for Information

OCD denies your C-104 – *Request for Allowable and Authorization to Transport* because it is incomplete or conflicts with other information provided to OCD.

The sale or transport of product without a C-104 approved by OCD violates the Oil and Gas Act and the implementing rules, including 19.15.7.15 and 19.15.16.19 NMAC.

To avoid an enforcement action, you must submit the indicated information no later than 30 days after receipt of this notice.

Test Allowable, New Well and Recompleted Well

Amend C-104 + BLD-4

- C-103 (or BLM equivalent) for all casing strings
 - Spud Notice
 - Surface Casing
 - Intermediate Casing (if applicable)
 - Additional Intermediate Casing (if applicable)
 - Production Casing or Liner

- Applicable Order (NSL, NSP, Other _____)

- Deviation Survey for Vertical Wells

- Directional Survey
 - C-102 (As-Drilled Plat for Horizontal Well)

New Well and Recompleted Well Only

- C-103 Completion Sundry (or BLM equivalent)
- C-105 Completion Report (or BLM equivalent)

All Logs Run on Well

? Received only one Gamma Ray

If you have any questions please contact the local OCD District Office

District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 S. First St., 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 & Natural Resources
Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

OCT 31 2019

Form C-104
Revised August 1, 2011

Submit one copy to appropriate District Office
RECEIVED

AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address OXY USA INC P.O. BOX 4294 HOUSTON, TX 77210		² OGRID Number 16696
⁴ API Number 30-015-45650	⁵ Pool Name INGLE WELLS; BONE SPRING	⁶ Pool Code 33740
⁷ Property Code: 324872	⁸ Property Name: PURE GOLD MDP1 29-17 FEDERAL COM	⁹ Well Number: 6H

II. ¹⁰ Surface Location

Ul or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County
P	29	23S	31E		545'	SOUTH	980'	EAST	EDDY

¹¹ Bottom Hole Location FTP:142' FSL 1205' FEL LTP: 2237' FSL 1324' FWL

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
I	17	23S	31E		2623'	SOUTH	539'	EAST	EDDY
¹² Lse Code F	¹³ Producing Method Code: F	¹⁴ Gas Connection Date: 7/26/2019	¹⁵ C-129 Permit Number	¹⁶ C-129 Effective Date	¹⁷ C-129 Expiration Date				

III. Oil and Gas Transporters

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address	²⁰ O/G/W
237722	CENTURION PIPELINE L.P.	O
151618	ENTERPRISE FIELD SERVICES LLC	G

IV. Well Completion Data

²¹ Spud Date	²² Ready Date	²³ TD	²⁴ PBDT	²⁵ Perforations	²⁶ DHC, MC
02/22/19	07/23/2019	9904' V/22922' M	9904'/22836'	9853'-22745'	
²⁷ Hole Size	²⁸ Casing & Tubing Size	²⁹ Depth Set	³⁰ Sacks Cement		
17-1/2"	13-3/8"	694'	870		
12-1/4"	9-5/8"	4279'	1190		
8-1/2"	7-5/8"	9011'	553		
6-3/4"	5-1/2"	22885'	1005		

V. Well Test Data

³¹ Date New Oil	³² Gas Delivery Date	³³ Test Date	³⁴ Test Length	³⁵ Tbg. Pressure	³⁶ Csg. Pressure
7/26/2019	7/7/2019	8/13/2019	24-HOUR		658
³⁷ Choke Size	³⁸ Oil	³⁹ Water	⁴⁰ Gas	⁴¹ Test Method	
96/164	3554	5316	4850	FLOWING	

⁴² I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature: *Sarah Chapman*
Printed name: SARAH CHAPMAN
Title: REGULATORY SPECIALIST
E-mail Address: SARAH.CHAPMAN@oxy.com
Date: **10/24/2019**
Phone: 713-350-4997

OIL CONSERVATION DIVISION

Approved by: **DENIED**
Title: **See Attached Cover Sheet**
Approval Date: _____

***RT* EXPIRED 10/24/19**

OCT 31 2019

Form 3160-4
(August 2007)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: July 31, 2010

WELL COMPLETION OR RECOMPLETION REPORT AND LOGS

RECEIVED

1a. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Dry <input type="checkbox"/> Other		6. If Indian, Allottee or Tribe Name	
b. Type of Completion <input checked="" type="checkbox"/> New Well <input type="checkbox"/> Work Over <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Diff. Resvr. Other _____		7. Unit or CA Agreement Name and No.	
2. Name of Operator OXY USA INC.		8. Lease Name and Well No. PURE GOLD MDP1 29-17 FEDERAL C 6H	
3. Address P.O. BOX 4294 HOUSTON, TX 77210		9. API Well No. 30-015-45650	
4. Location of Well (Report location clearly and in accordance with Federal requirements)* Sec 29 T23S R31E Mer NMP At surface SESE 545FSL 980FEL 32.269676 N Lat, 103.794463 W Lon Sec 29 T23S R31E Mer NMP At top prod interval reported below SESE 139FSL 449FEL 32.268560 N Lat, 103.792750 W Lon Sec 17 T23S R31E Mer NMP At total depth NESE 2623FSL 539FEL 32.304422 N Lat, 103.792764 W Lon		10. Field and Pool, or Exploratory INGLE WELLS BONE SPRING	
14. Date Spudded 02/22/2019		15. Date T.D. Reached 06/18/2019	
16. Date Completed <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod. 07/19/2019		17. Elevations (DF, KB, RT, GL)* 3360 GL	
18. Total Depth: MD 22922 TVD 9904		19. Plug Back T.D.: MD 22836 TVD 9904	
20. Depth Bridge Plug Set: MD TVD		21. Type Electric & Other Mechanical Logs Run (Submit copy of each) GAMMA RAY, MUD LOG	
22. Was well cored? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis)		Was DST run? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis)	
Directional Survey? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (Submit analysis)			

23. Casing and Liner Record (Report all strings set in well)

Hole Size	Size/Grade	Wt. (#/ft.)	Top (MD)	Bottom (MD)	Stage Cementer Depth	No. of Sk. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
6.750	5.500 SF TORQ	20.0		22885		1005	257	8505	
17.500	13.375 J-55	45.5	0	694		870	210	0	
12.250	9.625 HCL-80	43.5	0	4279		1190	500	0	
8.500	7.625 FJ/SF	26.4	0	9011		553	171	0	

24. Tubing Record

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)

25. Producing Intervals

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) BONE SPRING	9853	22745	9853 TO 22745	0.420	1512	ACTIVE
B)						
C)						
D)						

27. Acid, Fracture, Treatment, Cement Squeeze, Etc.

Depth Interval	Amount and Type of Material
9853 TO 22745	17666166GAL SLICKWATER AND 23357598# SAND

28. Production - Interval A

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
07/26/2019	08/13/2019	24	→	3554.0	4850.0	5316.0			FLOWERS FROM WELL
Choke Size	Tbg. Press. Flwg.	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
96/164	SI	658.0	→	3554	4850	5316		POW	

28a. Production - Interval B

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg.	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
	SI		→						

(See Instructions and spaces for additional data on reverse side)
ELECTRONIC SUBMISSION #490073 VERIFIED BY THE BLM WELL INFORMATION SYSTEM
** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED **

NEED "BLM" REVISIED COPY

28b. Production - Interval C

Date First Produced	Test Date	Hours Tested	Test Production →	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate →	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	

28c. Production - Interval D

Date First Produced	Test Date	Hours Tested	Test Production →	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate →	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	

29. Disposition of Gas(Sold, used for fuel, vented, etc.)
SOLD

30. Summary of Porous Zones (Include Aquifers):

Show all important zones of porosity and contents thereof: Cored intervals and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures and recoveries.

31. Formation (Log) Markers

Formation	Top	Bottom	Descriptions, Contents, etc.	Name	Top
					Meas. Depth
BELL CANYON	4192	5062	OIL, GAS, WATER	RUSTLER	433
CHERRY CANYON	5063	6380	OIL, GAS, WATER	SALADO	744
BRUSHY CANYON	6381	8031	OIL, GAS, WATER	CASTILE	2661
BONE SPRING	8032	8872	OIL, GAS, WATER	DELAWARE	4148
1ST BONE SPRING	8873	9330	OIL, GAS, WATER	BELL CANYON	4192
2ND BONE SPRING	9331	9904	OIL, GAS, WATER	CHERRY CANYON	5063
				BRUSHY CANYON	6381
				BONE SPRING	8032

32. Additional remarks (include plugging procedure):

LOG HEADER, DIIRECTIONAL SURVEY, AS DRILLED C-102, SUPPLEMENTAL AND WBD ATTACHED.

33. Circle enclosed attachments:

- 1. Electrical/Mechanical Logs (1 full set req'd.)
- 2. Geologic Report
- 3. DST Report
- 4. Directional Survey
- 5. Sundry Notice for plugging and cement verification
- 6. Core Analysis
- 7 Other:

34. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records (see attached instructions):

**Electronic Submission #490073 Verified by the BLM Well Information System.
For OXY USA INC., sent to the Carlsbad**

Name (please print) SARAH CHAPMAN Title REGULATORY SPECIALIST

Signature _____ (Electronic Submission) Date 10/29/2019

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

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