

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

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| <b>SUNDRY NOTICES AND REPORTS ON WELLS</b><br>(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.)<br>1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input checked="" type="checkbox"/> |  | WELL API NO.<br>30-015-33611   |
| 2. Name of Operator<br>OXY USA WTP LP   |  | 5. Indicate Type of Lease<br>STATE <input type="checkbox"/> FEE <input type="checkbox"/> |
| 3. Address of Operator<br>PO BOX 4294, HOUSTON, TX 77210  |  | 6. State Oil & Gas Lease No.   |
| 4. Well Location<br>Unit Letter <u>L</u> : <u>1200</u> feet from the <u>NORTH</u> line and <u>1490</u> feet from the <u>WEST</u> line<br>Section <u>11</u> Township <u>22S</u> Range <u>24E</u> NMPM County <u>EDDY</u>   |  | 7. Lease Name or Unit Agreement Name<br>MCKITTRICK 11 FEDERAL SWD                        |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)  |  | 8. Well Number <u>005</u>  |
| 9. OGRID Number<br>192463   |  | 10. Pool name or Wildcat<br>INDIAN BASINL UPPER PENN (ASSOC)                             |

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

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| <b>NOTICE OF INTENTION TO:</b><br>PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/><br>TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/><br>PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/><br>DOWNHOLE COMMINGLE <input type="checkbox"/><br>CLOSED-LOOP SYSTEM <input type="checkbox"/><br>OTHER: <input type="checkbox"/> | <b>SUBSEQUENT REPORT OF:</b><br>REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/><br>COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/><br>CASING/CEMENT JOB <input type="checkbox"/><br>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.

OXY USA WTP LP respectfully requests a 180-day extension on the subject well for the performance of the requested MIT from the previously approved date of 4/17/2020 due to COVID-19.

Federal Lease No. NMNM53219

*Extended to 10-17-20*

Spud Date:  Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Leslie T. Reeves TITLE REGULATORY ADVISOR DATE 06/16/2020

Type or print name LESLIE REEVES E-mail address: LESLIE\_REEVES@OXY.COM PHONE: 713-497-2492

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APPROVED BY: [Signature] TITLE Compliance officer DATE 6-17-20

Conditions of Approval (if any):