

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. 30-025-43365
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 SCHUBERT 18
8. Well Number #004H
9. OGRID Number 16696
10. Pool name or Wildcat
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3578' GL

OCD - HOBBS  
 03/18/2020  
 RECEIVED

**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  
OXY USA INC.

3. Address of Operator  
PO BOX 4294, HOUSTON, TX 77210

4. Well Location  
 Unit Letter O : 245 feet from the SOUTH line and 2405 feet from the EAST line  
 Section 18 Township 19S Range 39E NMPM County LEA

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

<b>NOTICE OF INTENTION TO:</b> 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"/>	<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: Temporarily Abandon & Perform MIT <input checked="" type="checkbox"/>
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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.

Schubert 18 #004 – 30-025-43365  
 TD-8955'MD/4574'TVD PBTd-8811'MD' Perfs-4931' – 8789'MD

9-5/8" 36# csg @ 1759' w/ 660sx, 12-1/2" hole, TOC-Surf-Circ  
 5-1/2" 17# csg @ 8955' w/ 1815 sx, 8-5/8" hole, TOC-~2900'

OXY USA Inc. respectfully requests to temporarily abandon this well. OXY is currently evaluating the uphole potential and therefore would like to TA the producing interval for future prospect and to remain in compliance.

2/25/20 MIRU. POOH with tubing. RIH with CIBP and set at 4860', dump bailed 35' of class c cement on top of CIBP. Tested casing to 500psi for 30 min, good test. 2/27/20 RDMO.

Notified NMOCD of casing integrity test. Performed casing integrity test 3/16/20. The test was witnessed. See the attached radial chart.

**TA EXPIRESE 03/16/2023**

Spud Date:

Rig Release Date:

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

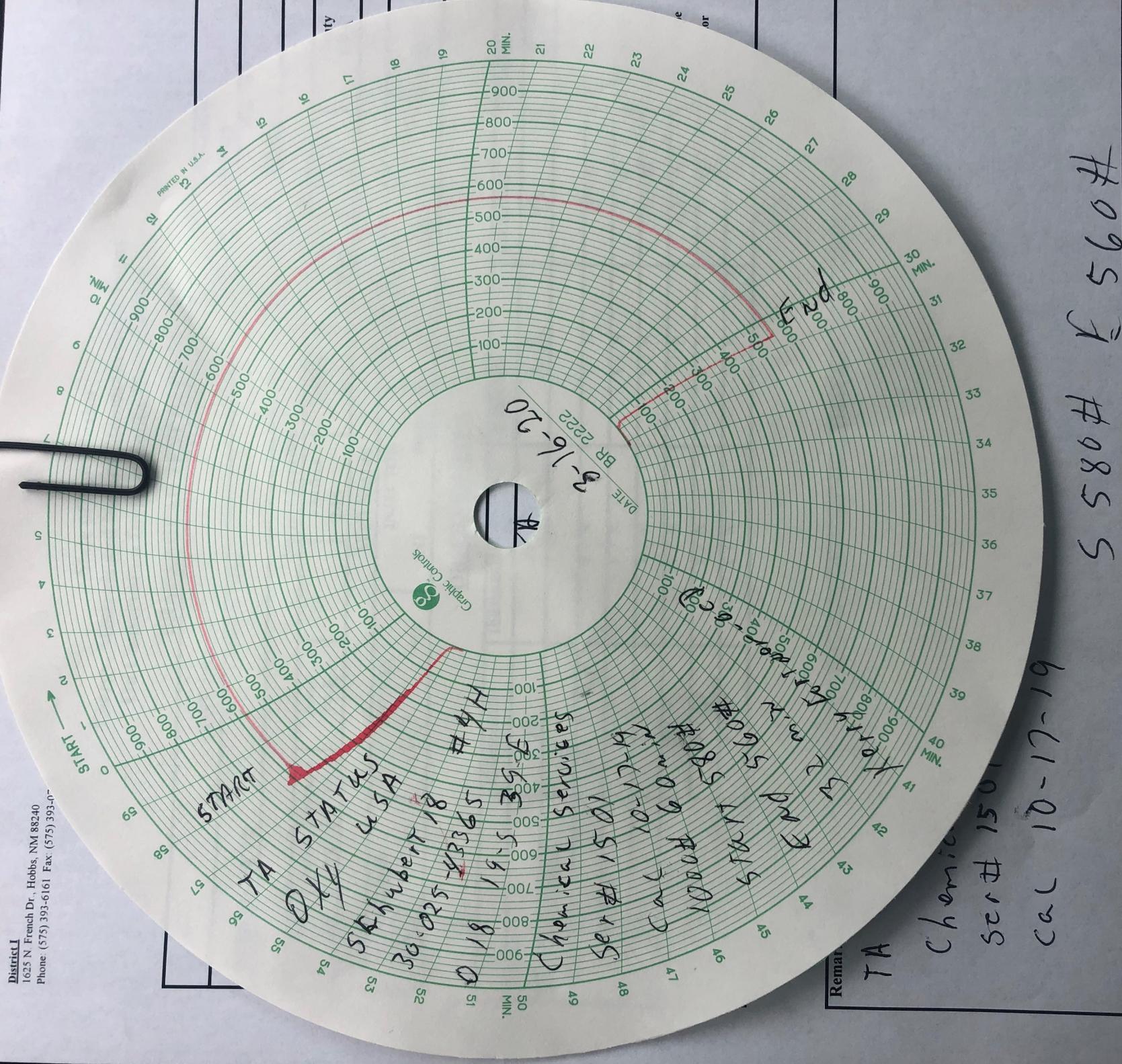
SIGNATURE Leslie T. Reeves TITLE REGULATORY ADVISOR DATE 03/18/2020

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

**For State Use Only**

APPROVED BY: [Signature] TITLE \_\_\_\_\_ DATE 05/15/2020

Conditions of Approval (if any): \_\_\_\_\_



Remarks

TA

Chemical

SER# 1501

CAL 10-17-19

5580# 560#

Signature:		OIL CONSERVATION DIVISION	
Printed name:		Entered into RBDMS	
Title:		Re-test	
E-mail Address:			
Date: 3/16/20	Phone:		
Witness: KERRY FORTNER-OCD 575-263-6633			