

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
HOBBS OGD
OIL CONSERVATION DIVISION
AUG 18 2013
220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-10
Revised August 1, 201

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.)		WELL API NO 30-025-05554 ✓
1. Type of Well: Oil Well ☐ Gas Well ☐ Other <u>Injection</u>		5. Indicate Type of Lease <u>Fed</u> ✓ STATE ☐ FEE ☐
2. Name of Operator OXY USA Inc.		6. State Oil & Gas Lease No. NM02503
3. Address of Operator P.O. Box 50250 Midland, TX 79710		7. Lease Name or Unit Agreement Name East Eumont Unit ✓
4. Well Location Unit Letter <u>A</u> : <u>660</u> feet from the <u>north</u> line and <u>660</u> feet from the <u>east</u> line Section <u>4</u> Township <u>19S</u> Range <u>37E</u> NMPM County		8. Well Number <u>14</u> ✓
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <u>3688</u>		9. OGRID Number 16696
		10. Pool name or Wildcat Eumont Yates TRON

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	P AND A ☐
PULL OR ALTER CASING ☐	MULTIPLE COMPL ☐	CASING/CEMENT JOB ☐	
DOWNHOLE COMMINGLE ☐			
OTHER: ☐		OTHER: <u>MT</u> ☒	

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.

TD- 3965' PBTD- 3959' Perfs- 3913-3958' Pkr- 3712'

1. Notified NMOC of casing integrity test 24hrs in advance.

2. RU pump truck 8/1/13, circulate well with treated water, pressure test casing to 590 # for 30 min.

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 David Stewart TITLE Regulatory Advisor DATE 8/15/13

Type or print name David Stewart E-mail address: david.stewart@oxy.com PHONE: 432-685-5717
For State Use Only

APPROVED BY: [Signature] TITLE DIST. MGR DATE 9-19-2013
Conditions of Approval (if any):

SEP 19 2013

HOBBS OCD

District 1

1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-6162

AUG 18 2013

State of New Mexico

RECEIVED

Energy, Minerals and Natural Resources Department
Oil Conservation Division Hobbs District Office

BRADENHEAD TEST REPORT

Operator Name OXY USA WTP Limited Partnership	API Number 30-025-05556
Property Name East Ewmont	Well No. 14

2. Surface Location

UL - Lot A	Section 04	Township 19S	Range 37E	Feet from 660	N/S Line N	Feet from 660	E/W Line E	County Lea
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Well Status

Well Status	SHUT-IN ☒	PRODUCING ☐	DATE 8-7-13
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OPEN BRADENHEAD AND INTERMEDIATE TO ATMOSPHERE INDIVIDUALLY FOR 15 MINUTES EACH

OBSERVED DATA

If bradenhead flowed water, check all of the descriptions that apply:

	(A)Surf-Interm	(B)Interm(1)-Interm(2)	(C)Interm-Prod	(D)Prod Casing	(E)Tubing
Pressure					0
Flow Characteristics					
Puff	☒ Y / N	Y / N	Y / N	☒ Y / N	
Steady Flow	Y / N	Y / N	Y / N	Y / N	
Surges	Y / N	Y / N	Y / N	Y / N	
Down to nothing	Y / N	Y / N	Y / N	Y / N	
Gas or Oil	Y / N	Y / N	Y / N	Y / N	
Water	Y / N	Y / N	Y / N	Y / N	

If bradenhead flowed water, check all of the descriptions that apply:

CLEAR	FRESH	SALTY	SULFUR	BLACK
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Remarks:

MIT Retest
WITNESSED by MARK WHITAKER.

ECG/OCD 9-19-2013

Signature: Perry Ham	OIL CONSERVATION DIVISION
Printed name: Perry Ham	Entered into RBDMS
Title: Production Tech	Re-test
E-mail Address: Perry_Ham@OXY.com	
Date: 8-7-13	Phone: 575 390 0796
Witness:	

