

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  
 Hobbs, NM  
 OIL CONSERVATION DIVISION  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505  
 RECEIVED  
 FEB 09 2014

Form C-103  
 Revised July 18, 2013

|   |  |   |
|---|--|---|
| SUNDRY NOTICES AND REPORTS ON WELLS<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.)                |  | WELL API NO.<br>30-025-11612 ✓  |
| 1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>  |  | 5. Indicate Type of Lease<br>STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 2. Name of Operator<br>OXY USA Inc. ✓   |  | 6. State Oil & Gas Lease No.<br>B229  |
| 3. Address of Operator<br>P.O. Box 50250 Midland, TX 79710  |  | 7. Lease Name or Unit Agreement Name<br>Annott Ramsey WCT-E ✓                                       |
| 4. Well Location<br>Unit Letter <u>0</u> : <u>660</u> feet from the <u>South</u> line and <u>1980</u> feet from the <u>east</u> line<br>Section <u>16</u> Township <u>25S</u> Range <u>37E</u> NMPM County <u>Lea</u> |  | 8. Well Number <u>2</u> ✓   |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)<br><u>3096'</u>  |  | 9. OGRID Number<br>16696  |
| 10. Pool name or Wildcat<br>Jalmat Tansill Yates 7R   |  |   |

12. Check appropriate box to indicate Nature of Notice, Report or Other Data

|  |                          |  |
|--|--------------------------|--|
| NOTICE OF<br>PERFORM REMEDIAL WORK<br>TEMPORARY PLUGGING<br>Approved for plugging of well bore only. Liability under bond is retained pending receipt of Report of Well Plugging (Specifically for Subsequent Report of Well Plugging) which may be found at OCD web page www.emnrd.state.nm.us/oecd | <input type="checkbox"/> | SUBSEQUENT REPORT OF:<br>REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/><br>COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input checked="" type="checkbox"/><br>CASING/CEMENT JOB <input type="checkbox"/> |
| OTHER:   | <input type="checkbox"/> | <input type="checkbox"/>   |

13. Describe completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

1/30/2014 MIRU, NDWH, NU BOP, POOH w/ tbg. RIH w/ gauge ring, tag up @ 2844', POOH. RIH w/ CIBP & set @ 2844', POOH. RIH w/ tbg & tag CIBP @ 2844', circ hole w/ 10# MLF, M&P 60sx CL C cmt, PUH, WOC.  
 1/31/2014 RIH & tag cmt @ 2508', POOH. RIH & perf @ 1020', EIR @ 2BPM, communicated between 2-3/8" & 7", RIH & move pkr & set @ 925', M&P 40sx CL C cmt, POOH, WOC.  
 2/3/2014 RIH & tag cmt @ 920', POOH. RIH & perf @ 330', POOH. RIH & set pkr @ 30', EIR @ 2BPM w/ full returns up 7" X 9-5/8". M&P 165sx CL C cmt, circ to surface. POOH, ND BOP, top off csg, RDPU.

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 Sr. Regulatory Advisor DATE 2/5/14

Type or print name David Stewart E-mail address: david\_stewart@oxy.com PHONE: 432-685-5717

For State Use Only  
 APPROVED BY: Mark White TITLE Compliance Officer DATE 02-11-2014

Conditions of Approval (if any):

FEB 11 2014 DEW