

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

**HOBBS OGD**

State of New Mexico  
 Energy, Minerals and Natural Resources  
**APR 09 2014** CONSERVATION DIVISION  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

Form C-103  
 Revised July 18, 2013

**RECEIVED**

WELL API NO. 30-025-10933
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 Myers Langlie Mattix Unit
8. Well Number 51
9. OGRID Number 192463
10. Pool name or Wildcat Langlie Mattix 7R Qu GB

**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 WTP Limited Partnership

3. Address of Operator  
P.O. Box 50250 Midland, TX 79710

4. Well Location  
 Unit Letter A : 660 feet from the north line and 660 feet from the east line  
 Section 33 Township 23S Range 37E NMPM County Lea

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3306'

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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		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. NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

- 3/26/2014 MIRU PU, ND WH, NU BOP, dig out cellar
- 3/27/2014 RIH & tag Cmt/CIBP @ 3359', circ hole w/ 10# MLF, M&P 25sx CL C cmt to 3214', Calc. PUH to 2609', M&P 50sx CL C cmt to 2319', Calc, POOH. RIH & set pkr @ 773'.
- 3/28/2014 RIH w/ WL & perf @ 1150', EIR @ 2BPM @ 400#, M&P 40sx CI C cmt w/ 2% CaCl2, PUH, WOC. RIH & tag cmt @ 1029', set pkr @ 40', RIH & perf @ 315', EIR w/ full returns. Rel pkr, POOH, ND BOP, NUWH, M&P 180sx CL C cmt, circ to surf, WOC.
- 3/31/2014 ND WH, top off w/ 20sx CI C cmt, cmt to surf, 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 4/2/14

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

For State Use Only

APPROVED BY: Maley Brown TITLE Compliance Officer DATE 4/7/2013  
 Conditions of Approval (if any):  
**APR 14 2014**