

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

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. 30-025-41644
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator OXY USA Inc.		6. State Oil & Gas Lease No. UO-4617-0002
3. Address of Operator P.O. Box 50250 Midland, TX 79710		7. Lease Name or Unit Agreement Name Ridge Runner 7 State
4. Well Location Unit Letter L : 1700 feet from the south line and 165 feet from the west line Section 7 Township 22S Range 33E NMPM County Lea		8. Well Number 14
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3615.5' GR		9. OGRID Number 16696
		10. Pool name or Wildcat Red Tank Bone Spring E.

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
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 checked="" type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input checked="" 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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Spud 14-3/4" hole 8/7/14, drill to 989' 8/8/14. RIH & set 11-3/4" 47# J-55 BTC csg @ 989', pump 30BFW spacer w/ red dye, then cmt w/ 420sx (130bbl) PPC w/ additives @ 13.5ppg 1.73 yield followed by 200sx (48bbl) PPC w/ additives @ 14.8ppg 1.35 yield, had full returns, circ 323sx (100bbl) cmt to surface. Install WH, test to 1050#, RU BOP, test @ 250# low 5000# high. 8/9/14, RIH & tag cmt @ 942', test csg to 2150# for 30 min, test passed, drill new formation to 999', perform FIT test to EMW=13.5ppg, 225psi good test.

Spud Date:

8/7/14

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 8/14/14

Type or print name

David Stewart

E-mail address:

david_stewart@oxy.com

PHONE:

432-685-5717

For State Use Only

APPROVED BY:

David Stewart

TITLE

Petroleum Engineer

DATE

08/20/14

Conditions of Approval (if any):

AUG 20 2014

MB

dm