

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. 30-025-33882
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 C.D. Woolworth
8. Well Number 11
9. OGRID Number 16696
10. Pool name or Wildcat Langlie Mattix TRUGB Jalinet Tausill Rates 7E
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3258

**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  **HOBBS OCD**

2. Name of Operator  
OXY USA Inc. **OCT 05 2015**

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

4. Well Location **RECEIVED**  
 Unit Letter N : 1185 feet from the south line and 1330 feet from the west line  
 Section 30 Township 24S Range 37E NMPM County Lea

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

<b>E-PERMITTING &lt;SWD INJECTION&gt;</b> CONVERSION <input type="checkbox"/> RBDMS <input type="checkbox"/> RETURN TO <input type="checkbox"/> TA <input type="checkbox"/> CSNG <input type="checkbox"/> ENVIRO <input type="checkbox"/> CHG LOC <input type="checkbox"/> INT TO PA <input type="checkbox"/> P&A NE <input checked="" type="checkbox"/> P&A R <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 checked="" type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: <input 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. NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

9/28/2015 RUPU, NU BOP and attach to WH and accumulator, POOH w/ rods and pump.  
 9/29/2015 POOH w/ tbg, RIH & set CIBP @ 3110'. RIH w/ tbg & tag CIBP @ 3110', circ hole w/ 10# MLF. Mark Whitaker-NMOCD approved combining 1st two plugs. M&P 45sx CL C cmt, PUH, WOC.  
 9/30/2015 RIH & tag cmt @ 2423', PUH to 1258', M&P 25sx CL C cmt, PUH, WOC. RIH & tag cmt @ 935', PUH to 552', M&P 25sx CL C cmt, PUH, WOC. RIH & tag cmt @ 280', POOH.  
 10/1/2015 RIH & perf @ 250', attempt to EIR, pressure up to 1500#, no rate. PUH & perf @ 100', EIR @ 1-3/4 bpm @ 100#, RIH to 270', M&P 25sx CL C cmt to 100', sqz 30sx Cl C cmt @ 100', circ to surface, visually confirmed. Mark Whitaker-NMOCD approved plugs. RD BOP, ND PU.

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 10/2/15

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

For State Use Only

APPROVED BY: Mary Brown TITLE Dist. Supervisor DATE 10/5/2015  
 Conditions of Approval (if any)

OCT 07 2015