

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

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| WELL API NO. 30-025-11570 |
| 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 Leancy McBuffington |
| 8. Well Number 9 |
| 9. OGRID Number 16696 |
| 10. Pool name or Wildcat Langlie Mattix TR Qu GB |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3078 |

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 Inc.

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

4. Well Location
 Unit Letter K : 1650 feet from the South line and 1980 feet from the west line
 Section 13 Township 25S Range 37E NMPM County Lea

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

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|--|--|
| E-PERMITTING <SWD INJECTION> CONVERSION _____ RBDMS _____ <input type="checkbox"/> RETURN TO _____ TA _____ <input type="checkbox"/> CSNG _____ ENVIRO _____ CHG LOC _____ <input type="checkbox"/> INT TO PA _____ P&A NR <input checked="" type="checkbox"/> P&A R _____ <input type="checkbox"/> | SUBSEQUENT REPORT OF: 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.

- 11/20/2015 MIRU PU, NDWH, NU BOP, start to RIH w/ tbg.
- 11/23/2015 Continue to RIH w/ tbg & tag CIBP @ 3030', circ hole w/ 10# MLF, test csg/CIBP to 700#, tested good, M&P 25sx CL C cmt, calc TOC-2876', POOH. RIH & set pkr @ 1370', RIH w/ WL & perf @ 1653', attempt to EIR, pressure to 1500#, no rate. Rec NMOCD approval to spot cement. RIH to 1700', M&P 30sx CL C cmt, PUH, WOC.
- 11/24/2015 RIH & tag cmt @ 1540', PUH, set pkr @ 30', RIH & perf @ 469', EIR @ 1.5bpm @ 500#, rel pkr, ND BOP NU WH, M&P 150sx CL C cmt, circ to surface, cement at all casing valves. 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 11/30/15

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

For State Use Only
 APPROVED BY: Maury Brown TITLE Dist. Supervisor DATE 12/3/2015
 Conditions of Approval (if any)

DEC 03 2015