

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. 30-025-10929
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 79
9. OGRID Number 192463
10. Pool name or Wildcat Langlie Mattix TR QnGB
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3280'

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 <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <u>Injection</u>	
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 <u>E</u> : <u>2310</u> feet from the <u>North</u> line and <u>990</u> feet from the <u>west</u> line Section <u>33</u> Township <u>23S</u> Range <u>37E</u> NMPM County <u>Lea</u>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3280'	

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

NOTICE OF IN PERFORM REMEDIAL WORK <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: <input type="checkbox"/>	INT TO PA P&A NR P&A R <u>PA</u>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/> P AND A <input checked="" 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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

2/5/2016 RUPU, NU BOP & accumulator, RIH & tag CIBP @ 3350', circ hole w/ 10# MLF, M&P 25sx CL C cmt, Calc TOC 3201', PUH to 2784'.
2/8/2016 RIH & tag cmt @ 2760', PUH to 2550', M&P 25sx CL C cmt, PUH, WOC. RIH & tag cmt @ 2396', POOH. RIH & set pkr @ 875', RIH & perf @ 1275', EIR @ 2BPM @ 600#, M&P 35sx CL C cmt, PUH, WOC.
2/9/2016 RIH & tag cmt @ 1150', PUH & perf @ to 264', EIR @ 2BPM @ 0# w/ full circ, M&P 110sx CL C cmt, circ to surf, visually confirmed. RD BOP & accumulator, RD 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 2/10/16

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

For State Use Only

APPROVED BY: Mark Whitaker TITLE Petroleum Engr. Specialist DATE 02/17/2016

Conditions of Approval (if any):

FEB 18 2016