

HOBBS OCD

MAY 17 2016

RECEIVED

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 5-27-2004

FILE IN TRIPLICATE

DISTRICT I
1625 N. French Dr., Hobbs, NM 88240

DISTRICT II
1301 W. Grand Ave, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd, Aztec, NM 87410

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-025-07542
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name State Land Section 32
8. Well No. 8
9. OGRID No. 16696
10. Pool name or Wildcat Bowers 7 Rivers

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 Temporarily Abandoned

2. Name of Operator
Oxy USA, Ltd.

3. Address of Operator
HCR 1 Box 90 Denver City, TX 79323

4. Well Location
Unit Letter I : 1980 Feet From The South 660 Feet From The East Line
Section 32 Township 18-S Range 38-E NMPM Lea County Lea

11. Elevation (Show whether DF, RKB, RT GR, etc.)
3637' GR

Pit or Below-grade Tank Application or Closure
Pit Type _____ Depth of Ground Water _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____
Pit Liner Thickness _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

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

E-PERMITTING <SWD _____ INJECTION>	SUBSEQUENT REPORT OF:
PI CONVERSION _____ RBDMS <u>MB</u>	REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/>
TI RETURN TO _____ TA <u>RMV</u>	COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG & ABANDONMENT <input type="checkbox"/>
PI CSNG _____ ENVIRO _____ CHG LOC _____	CASING TEST AND CEMENT JOB <input type="checkbox"/>
O INT TO PA _____ P&A NR _____ P&A R _____	OTHER: <u>Casing integrity test/TA status request</u> <input checked="" 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Date of test: 04/16/2016

Pressure readings: Initial - 630 PSI Ending - 620 PSI

Length of test: 35 minutes

Witnessed: NO

This Approval of Temporary Abandonment Expires 4/16/2017

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan

SIGNATURE Mendy A Johnson TITLE Administrative Associate DATE 05/16/2016

TYPE OR PRINT NAME Mendy A. Johnson E-mail address: mendy_johnson@oxy.com TELEPHONE NO. 806-592-6280

For State Use Only

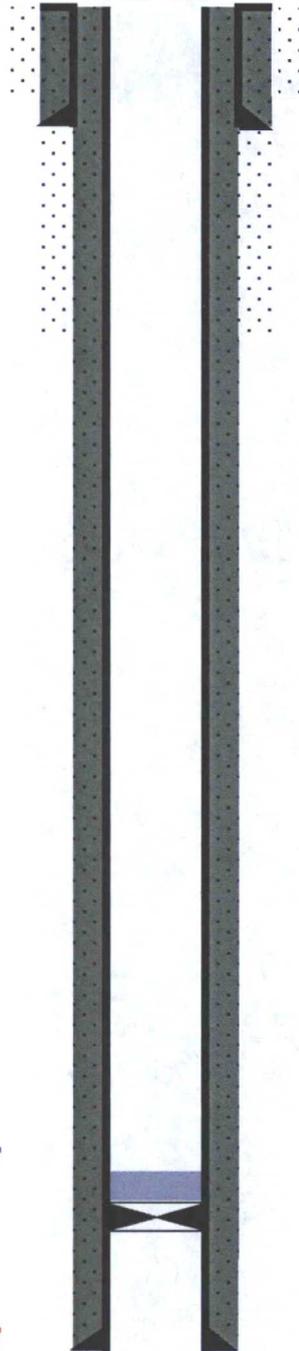
APPROVED BY Mary E Brown TITLE Dist. Supervisor DATE 5/20/2016

CONDITIONS OF APPROVAL IF ANY:

State L Sec. 32 008

API# 30-025-07542

TWN 18-S; RNG 38-E
Prod - TA'd



8-5/8" 24# @ 300'
cmt'd w/125 sxs
TOC @ Surface (Circ.)

Spot 30' on top of CIBP @ 3050'

5-1/2" 15.5# @ 3124'
cmt'd w/1000 sxs
TOC @ 350' (Calc.)

Plugged Back OH Pay: 3124-3192'

PBTD @ 3020'
TD @ 3192'

American Valve & Meter, Inc.

1113 W. BROADWAY

P.O. BOX 166 HOBBS,
NM 88240

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T0: Pate Trucking

DATE: 12/15/15

This is to certify that:

I, Tony Flores

Technician for American Valve & Meter Inc.

has checked the calibration of the following instrument.

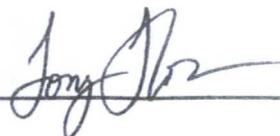
8" Pressure recorder

Ser.# 12517

at these points.

Pressure #			Temperature *or Pressure #		
Test	Found	Left	Test	Found	Left
- 0	-	- 0	-	-	-
- 500	-	- 500	-	-	-
- 700	-	- 700	-	-	-
- 1000	-	- 1000	-	-	-
- 200	-	- 200	-	-	-
- 0	-	- 0	-	-	-

Remarks: _____

Signature:  _____