

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  
**OIL CONSERVATION DIVISION**  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

Form C-103  
 Revised July 18, 2013

**HOBBS OCD**  
**OCT 06 2016**  
**RECEIVED**

WELL API NO. 30-025-05589
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B2461
7. Lease Name or Unit Agreement Name East Eumant Unit
8. Well Number 33
9. OGRID Number 192463
10. Pool name or Wildcat Eumant Yates TRQN
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3671'

**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 WTP LP

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

4. Well Location  
 Unit Letter F : 1980 feet from the north line and 1930 feet from the west line  
 Section 10 Township 19S Range 37E NMPM County Lea

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

<b>NOTICE OF INTENTION:</b> 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"/>	<b>INT TO PA</b> <b>P&amp;A NR</b> <u>Fr. x</u> <b>P&amp;A R</b> _____	<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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

- 9/21/2016 MIRU PU, dig out cellar, start to POOH w/ rods & pump.
- 9/22/2016 Continue to POOH w/ rods & pump. RU BOP & accumulator, POOH w/ tbg.
- 9/23/2016 RIH w/ gauge ring to 3800', POOH. RIH & set CIBP @ 3753'. RIH w/ tbg & tag CIBP @ 3753', circ hole w/ 10# MLF, M&P 25sx CL C cmt, calc TOC 3512'. Pressure csg to 500#, held OK. PUH to 3110', M&P 25sx CL C cmt, PUH, WOC.
- 9/26/2016 RIH & tag cmt @ 2807', PUH to 1878', M&P 25sx CL C cmt, PUH, WOC. RIH & tag cmt @ 1565', POOH. RIH & set pkr @ 30', RIH & perf @ 310', EIR @ 1bpm @ 0#, M&P 130sx CL C cmt, cmt circ to surf, visually confirmed. ND BOP & accumulator. RDPU

Approved for Plugging of wellbore only. Liability under bond is retained pending restoration and completion of the C-103, Specific for Subsequent Report of Well Plugging, which may be found on the OCD web page under forms.

Spud 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 10/4/16

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

**For State Use Only**

APPROVED BY: Mark Whitman TITLE P.E.S. DATE 10/6/2016

Conditions of Approval (if any):