| Submit 1 Copy To Appropriate  Office  | District               | State of New Mexico                    |                 |                | Form C-103                               |                  |                          |  |
|---|------------------------|--|-----------------|----------------|--|------------------|--------------------------|--|
| District I – (575) 393-6161   | Energy                 | Energy, Minerals and Natural Resources |                 |                | - <u></u>                                | Revised A        | August 1, 2011           |  |
| 1625 N. French Dr., Hobbs, NM   | 88240                  |  |                 |                | WELL API NO.                             |                  |                          |  |
| <u>District II</u> – (575) 748-1283<br>811 S. First St., Artesia, NM 883  | OIL C                  | OIL CONSERVATION DIVISION              |                 |                | 30-025-23759                             |                  |                          |  |
| District III - (505) 334-6178   | 1                      | 1220 South St. Francis Dr.             |                 |                | 5. Indicate Type of Lease STATE ☑ FEE □  |                  |                          |  |
| 1000 Rio Brazos Rd., Aztec, NN<br><u>District IV</u> – (505) 476-3460   | 1 87410                | Santa Fe, NM 87505                     |                 |                | 6. State Oil & Gas                       |                  |                          |  |
| 1220 S. St. Francis Dr., Santa Fe   | , NM                   |  |                 | <b>5</b>       | o. State on & Gas                        | Lease No.        |                          |  |
| 87505   | AV MOTICES AND D       | EDODTE ON WELL                         |                 | 9.             | 7 1 2                                    | 1 T . * 4 . 4 .  | . 27                     |  |
| (DO NOT USE THIS FORM FO  | RY NOTICES AND RI      | LPORTS ON WELL                         | ES CE TO A      | .              | 7. Lease Name or                         |                  | nent Name<br>Unit Conoco |  |
| DIFFERENT RESERVOIR. US   | SE "APPLICATION FOR PI | ERMIT" (FORM C )                       | FOR SUCH "      | <b>∤ &amp;</b> | 8. Well Number:                          | 008 (Grozz)      |                          |  |
| PROPOSALS.)   |                        | <b>77</b> -                            | " 07 %          |                | 8. Well Number:                          | 1                | STATE                    |  |
| 1. Type of Well: Oil We 2. Name of Operator   | II ⊠ Gas Well □        | Other: Injector                        | 70/ 0           | (D)            | 9. OGRID Numbe                           | <u>.</u>         |                          |  |
| 2. Name of Operator   | Oxy USA I              | nc.                                    | CEN             | 4              |  | 1.<br>16696      |                          |  |
| 3. Address of Operator  |                        |  | 0               |                | 10. Pool name or Wildcat                 |                  |                          |  |
|   | P.O. Box 4294, Houst   | on, TX, 77210                          | 400             |                |  | bs (G/SA)        |                          |  |
| 4. Well Location  |                        | · · · · · · · · · · · · · · · · · · ·  | <del></del>     |                |  |                  |                          |  |
| Unit Letter   | G : 1980 feet fro      | m the North                            | line and        | 2130           | feet from the                            | East             | line                     |  |
| Section   | 33 Townsh              |  | Range           | 38E            | NMPM                                     | Lea              | County                   |  |
| / with a 1000 to 2000 |                        | on (Show whether D                     |                 |                |  | Dea              | County                   |  |
| :   | 3640' (GR)             | *                                      | ,,, .           | -1, -10.7      |  |                  |                          |  |
|   |                        |  |                 |                |  |                  |                          |  |
| 12.   | Check Appropriate      | Box to Indicate                        | Nature of No    | otice. R       | Report or Other I                        | )ata             | Jan                      |  |
|   | •••                    |  |                 | -              | •  |                  |                          |  |
| NOTICE  | OF INTENTION           | TO:                                    |                 | SUBS           | EQUENT REP                               | ORT OF           |                          |  |
| PERFORM REMEDIAL W  |                        | ABANDON                                | REMEDIAL        |                |  | ALTERING (       | CASING                   |  |
| TEMPORARILY ABANDON   |                        |  |                 | CE DRIL        | LING OPNS.                               | P AND A          |                          |  |
| PULL OR ALTER CASING  | MULTIPLE               | COMPL                                  | CASING/C        | <b>EMENT</b>   | JOB 🗆                                    |                  | PNR                      |  |
| DOWNHOLE COMMINGL   | .E 🔲                   |  |                 |                |  |                  | 11010                    |  |
| OTHER:  |                        |  | OTHER:          |                |  |                  |                          |  |
| 13. Describe proposed   | or completed operation | ns. (Clearly state a                   |                 | ils, and       | give pertinent dates                     | including        | estimated date           |  |
|   | posed work). SEE RU    |  |                 |                |  |                  |                          |  |
|   | ion or recompletion.   |  | •               | •              | •  |                  |                          |  |
|   | •                      |  |                 |                |  |                  |                          |  |
|   |                        |  |                 |                |  |                  |                          |  |
|   |                        |  |                 |                |  | _                |                          |  |
| NE /20 /2010  | and rev unit, Check p  |  |                 |                |  |                  | <del>-</del>             |  |
| 1000 psi  | and held, Ru cement    | · · · · · · · · · · · · · · · · · · ·  | •               | _              |  | _                |                          |  |
| •   | Displaced w/ 12.6 bb   | ols of plug mud, Ro                    | d cement truc   | ks, Poo        | h w 88 2-7/8" tbg                        | , Layed dov      | wn 115 2-3/8"            |  |
| tbg, Sion   | •                      |  |                 |                |  |                  |                          |  |
|   |                        |  |                 |                |  | ē                |                          |  |
|   |                        |  |                 | Dur            | ing this procedu                         | re we pla        | n to use                 |  |
|   |                        |  |                 | the            | closed-loop sys                          | tem with a       | a steel                  |  |
|   |                        |  |                 | tan            | k and haul conte                         | ents to the      | e required               |  |
|   |                        |  |                 | dic            | posal per ODC                            | Rule 19.15       | 5.17                     |  |
|   |                        |  |                 | uisį           | posar per obc .                          |                  |                          |  |
| Spud Date:  | 0.6/0.0/0.10           | Rig Release                            | Date:           |                | (0.0.10.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0. | 7                |                          |  |
| · ' '   | 05/28/2019             | <u> </u>                               |                 | 05.            | /29/2019                                 |                  |                          |  |
|   |                        | _                                      |                 |                |  |                  |                          |  |
| I hereby certify that the infe  | ormation above is true | and complete to the                    | best of my kno  | wledge         | and belief.                              |                  |                          |  |
|   |                        | >                                      |                 |                |  |                  |                          |  |
| SIGNATURE   |                        | TITLE Produc                           | tion Engineer   |                | DATE <u>6/07</u>                         | /2019            |                          |  |
|   | , –                    |  |                 | _              |  |                  |                          |  |
| Type or print name <u>Carlo</u>   | s Kestrepo             | E-mail address                         | carlos restrepo | (a)oxy.c       | om PHONE: 713                            | <u>-838-5772</u> |                          |  |
| For State Use Only  |                        | -                                      |                 |                | A  |                  |                          |  |
| APPROVED BY: YEM  | a fat                  | TITLE (~                               | rplance         | 0005           | T A DAT                                  | E 7-9            | -1G                      |  |
| Conditions of Approval (if  | <b>(</b> y):           |  | The same of     | The            |  |                  | <del></del>              |  |
|   |                        |  |                 |                |  |                  |                          |  |

05/29/2019

Check psi, 0 psi, Ruwl, Rih and tagged top of cmt @3700', Notified nmocd, Shot squeeze holes @ 2700', Pooh and rdwl, Pressure tested csg to 1200 psi and held, Notified nmocd, Rih to 2750' spott cement plug to 2600', Pooh w/ 54 2-3/8" tbg and layed down 36 2-3/8" tbg, Ruwl, Rih and tagged top of cmt @ 2600', Notifed nmocd, Rdwl, Rih to 1650', Spotted cmt plug to 1550', Pooh w 36 2-3/8" tbg, Layed down 18 2-3/8" tbg, Ruwl, Rih and shot squeezed holes @ 1050', Pressured up on csg and stared circulating out surface valve, Notified nmocd, Decided to circulate cement to surface, Rih w 26 2-3/8" tbg, Layed down 26 2-3/8" tbg, Circulate 40 bbls of cmt to surface, Shut surface valve and pressured up to 400 psi and held, Nd bop, Loaded 4-1/2" liner to top, Tried to pump down 7" intermediate csg but would not take cmt, Rd cmt trucks, Rdpu, Cleaned location, Sion. Final Report