

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 87240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
May 27, 2004

RECEIVED
JAN 20 2010
HOBBSON
CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-025-21099
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. S-91017
7. Lease Name or Unit Agreement Name: New Mexico E State
8. Well Number 4
9. OGRID Number 16696
10. Pool name or Wildcat Mescalero San Andres

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 checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input checked="" type="checkbox"/>	2. Name of Operator OXY USA Inc.
3. Address of Operator P.O. Box 50250 Midland, TX 79710-0250	4. Well Location Unit Letter F: 1650 feet from the north line and 1650 feet from the west line Section 26 Township 10S Range 32E NMPM County Lea
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4311' GR	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> Pit type _____ Depth to Groundwater _____ 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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☒
CASING TEST AND CEMENT JOB ☐
OTHER: ☐

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give dates of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

1/11/10 MIRU, NDWH, NU BOP. RIH W/ TBG & TAG CIBP @ 4090', CIRC W/ 10# MUD LADEN FLUID SPOT 25SX CL C CMT ON CIBP, CALC TOC @ 3729'. PUH TO 3138'
1/12/10 SPOT 25SX CL C CMT @ 3138'. CALC TOC @ 2778', POOH W/ TBG RIH W/ WL, PERF @ 2300', 1600', 200', POOH W/ WL. RIH W/ PKR. SQZ 55SX CL C CMT W/ 2% CACL2 @ 2300', WOC 3HRS, RIH & TAG CMT @ 2092', POOH
1/13/10 RIH W/ TBG & SET PKR @ 1200', SQZ 55SX CL C CMT @ 1600', WOC 3HRS. RIH & TAG CMT @ 1585' POOH W/ PKR, CONTACT NMOCD (MAXIE BROWN). M&P 25SX CL C CMT @ 1585', WOC.
1/14/10 RIH & TAG CMT @ 1232', POOH W/ TBG. RIH & SET PKR @ 30', CIRC 90SX CL C CMT TO SURFACE
1/15/10 ND BOP, TOP OFF CASING, RDPU, WELL P&A'D.

Approved for plugging of well bore only.
Liability under bond is retained until date of C-103 (Subsequent Report pending date of C-103) is received by the State.
Form C-103 (Subsequent Report pending date of C-103) is received by the State.
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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 David Stewart TITLE Sr. Regulatory Analyst DATE 1-13-10
E-mail address: david_stewart@oxy.com
Type or print name David Stewart Telephone No. 432-685-5717

For State Use Only

APPROVED BY David Stewart TITLE DISTRICT 1 SUPERVISOR DATE JAN 21 2010
Conditions of Approval, if any: