

UNITED STATES
DEPARTMENT OF THE INTERIOR ~~OPERATOR'S COPY~~
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB NO 1004-0135
Expires: November 30, 2000

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM86024
2. Name of Operator OXY USA Inc.		6. If Indian, Allottee or Tribe Name
3a. Address P.O. Box 50250, Midland, TX 79710-0250		7. If Unit or CA/Agreement, Name and/or No
3b. Phone No. (include area code) 432-685-5717		8. Well Name and No Cypress 34 Federal #6H
4. Location of Well (Footage, Sec, T., R., M., or Survey Description) SL - 400 FSL 400 FWL SWSW(M) Sec 34 T23S R29E TL - 631 FNL 625 FWL NWNW(D) Sec 34 T23S R29E		9. API Well No 30-015-38366
		10. Field and Pool, or Exploratory Area Undsg Nash Draw Delaware, SW
		11. County or Parish, State Eddy NM

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other <u>Completion</u>
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13 Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the final site is ready for final inspection.)

MIRU 3/9/11, Drill out DV Tools and clean out to PBTD @ 10318'M. Run CBL, Perf @ 10284-9484, 9210-8395, 8115-7285' Total 96 holes. Frac w/ a total of 115976g Water Frac GR 11 followed by 14000g 7-1/2% HCl Acid followed by 356675g Delta Frac 200 R 17 w/ 624232# sand, RD Halliburton BRH W/ ESP and start to pump back load 4/6/11.

Accepted For Record
NMOCD P. 22
7-4-11

RECEIVED
JUL 06 2011
NMOCD ARTESIA

ACCEPTED FOR RECORD
MAY 29 2011
[Signature]
BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE

14 I hereby certify that the foregoing is true and correct Name (Printed/Typed) David Stewart	Title Regulatory Advisor
<i>[Signature]</i>	Date 5/16/11

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by	Title	Date
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.	Office	