

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

RECEIVED

OCD Artesia  
MAR 19 2014

NMOCD ARTESIA

FORM APPROVED  
OMB NO. 1004-0135  
Expires: July 31, 2010**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. NMNM53218
2. Name of Operator OXY USA WTP LIMITED PTNRSHIP E-Mail: david_stewart@oxy.com		6. If Indian, Allottee or Tribe Name
3a. Address MIDLAND, TX 79710-0250		7. If Unit or CA/Agreement, Name and/or No. NMNM111020
3b. Phone No. (include area code) Ph: 432-685-5717 Fx: 432-685-5742		8. Well Name and No. RIGHTHAND CANYON 35 FEDERAL 4
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 35 T21S R24E SENW 2310FNL 1475FWL		9. API Well No. 30-015-33290-00-S1
		10. Field and Pool, or Exploratory INDIAN BASIN-UPPER PENN ASSOC
		11. County or Parish, and State EDDY COUNTY, 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 checked="" 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 type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input checked="" 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 recompleate 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 recompleation 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 site is ready for final inspection.)

2/5/2014 MIRU PU, Dig out cellar to Surface wellhead.

2/7/2014 NDWH, NU BOP, POOH w/ tbg, RIH &amp; set CIBP @ 7787'.

2/10/2014 RIH &amp; tag CIBP @ 7787', Circ hole w/ 10# MLF, M&amp;P 50sx CLH cmt, PUH, WOC.

2/11/2014 RIH &amp; tag cmt @ 7415', PUH to 7383', circ hole w/ 10# MLF, M&amp;P 40sx CLH cmt, PUH, WOC.

2/12/2014 RIH &amp; tag cmt @ 7187'. PUH to 5672', M&amp;P 40sx CL C cmt, PUH, WOC.

2/13/2014 RIH &amp; tag cmt @ 5418'. PUH to 4056', M&amp;P 40sx CL C cmt w/ 2% CaCl2, PUH, WOC. RIH &amp; tag cmt @ 3876'. PUH to 3802', M&amp;P 40sx CL C cmt, PUH, WOC.

Accepted as to plugging of the well bore.  
Liability under bond is retained until  
Surface restoration is completed.RECLAMATION  
DUE 8-17-14U2D 3/25/2014  
Accepted for record

14. I hereby certify that the foregoing is true and correct. <b>Electronic Submission #236007 verified by the BLM Well Information System For OXY USA WTP LIMITED PTNRSHIP, sent to the Carlsbad Committed to AFMSS for processing by DEBORAH HAM on 03/07/2014 (14DMH0173S)</b>	
Name (Printed/Typed) DAVID STEWART	Title SR. REGULATORY ADVISOR
Signature (Electronic Submission)	Date 02/19/2014
THIS SPACE FOR FEDERAL OR STATE OFFICE USE	
Approved By	Title
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
Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.	

\*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\*

**Additional data for EC transaction #236007 that would not fit on the form**

**32. Additional remarks, continued**

2/14/2014 RIH & tag cmt @ 3580', PUH to 2535', M&P 35sx CL C cmt, PUH, WOC.

2/17/2014 RIH & tag cmt @ 2345', PUH to 1647', M&P 40sx CL C cmt, PUH, WOC.

2/18/2014 RIH & tag cmt @ 1465', POOH. RIH & perf @ 60', POOH. Test perms to 500# w/ no loss.  
RIH to 254', M&P 50sx CL C cmt, circ to surf, POOH. ND BOP, top off csg, RDPU.