

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

NM OIL CONSERVATION  
ARTESIA DISTRICT

FORM APPROVED  
OMB NO. 1004-0135  
Expires: July 31, 2010

**SUNDRY NOTICES AND REPORTS ON WELLS** MAR 02 2015  
*Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.*

RECEIVED

**SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM0417696
2. Name of Operator OXY USA INC.		6. If Indian, Allottee or Tribe Name
Contact: JANA MENDIOLA E-Mail: janalyn_mendiola@oxy.com		7. If Unit or CA/Agreement, Name and/or No.
3a. Address P.O. BOX 50250 MIDLAND, TX 79710	3b. Phone No. (include area code) Ph: 432-685-5936 Fx: 432-685-5742	8. Well Name and No. LOST TANK 4 FEDERAL 23
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 4 T22S R31E SWNE 1378FNL 1764FEL 32.423903 N Lat, 103.779500 W Lon		9. API Well No. 30-015-40775
		10. Field and Pool, or Exploratory LOST TANK WOLFCAMP
		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 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
	<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 recompletable 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 site is ready for final inspection.)

RU CTU 5/3/13, RIH & Tag PBTD @ 13370', pressure test csg to 5000# for 30 min, good test. RIH & perf @ 12914-13072' Total 87 holes. Frac 1 stage w/ 4000g 15% HCl acid + 231494g 20# BXL w/ 170741# sand, RD Nabors. RIH & clean out well, tag up PBTD @ 13370', POOH, RIH with 2-3/8" tbg & pkr set @ 12835', RD 2/2/15. Flow to clean up and test well for potential.

APD 3/2/15  
Accepted for record  
NMOCD

14. I hereby certify that the foregoing is true and correct. <b>Electronic Submission #291047 verified by the BLM Well Information System</b> <b>For OXY USA INC., sent to the Carlsbad</b> <b>Committed to AFMSS for processing by DEBORAH HAM on 02/20/2015</b>		<div style="border: 2px solid black; padding: 5px; text-align: center;"> <b>ACCEPTED FOR RECORD</b>   <b>FEB 20 2015</b> </div>
Name (Printed/Typed) DAVID STEWART	Title SR. REGULATORY ADVISOR	
Signature (Electronic Submission)	Date 02/10/2015	
<b>THIS SPACE FOR FEDERAL OR STATE OFFICE USE</b>		
Approved By _____	Title _____	<div style="border: 1px solid black; padding: 5px;"> BUREAU OF LAND MANAGEMENT CARLSBAD FIELD OFFICE </div>
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.		

**\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\***