

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTNMOCD
ArtesiaFORM 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. NMNM94651
2. Name of Operator OXY USA INCORPORATED		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 5 GREENWAY PLAZA STE 110 HOUSTON, TX 77046-0521	3b. Phone No. (include area code) Ph: 432-685-5936 Fx: 432-685-5742	8. Well Name and No. CEDAR CANYON 27 FEDERAL 7H
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 28 T24S R29E SESE 1790FSL 0240FEL 32.184430 N Lat, 103.981106 W Lon		9. API Well No. 30-015-43233-00-X1
		10. Field and Pool, or Exploratory PIERCE CROSSING
		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 checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Deepen
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Alter Casing
	<input type="checkbox"/> Fracture Treat
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Change Plans
	<input type="checkbox"/> Plug and Abandon
	<input type="checkbox"/> Convert to Injection
	<input type="checkbox"/> Plug Back
	<input type="checkbox"/> Production (Start/Resume)
	<input type="checkbox"/> Reclamation
	<input type="checkbox"/> Recomplete
	<input type="checkbox"/> Temporarily Abandon
	<input type="checkbox"/> Water Disposal
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Well Integrity
	<input checked="" type="checkbox"/> Other Drilling Operations

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 recompleat 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 recompleat 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.)

11/08/15, Skid rig from Cedar Canyon 28 Federal 6H to Cedar Canyon 27 Federal 7H, RU BOP, test @ 250# low 5000# high, good test. Test intermediate casing to 4800# for 30 min, good test. Drill out DVT, RIH & tag cmt @ 7916'. Drill new formation to 8017', perform FIT test EMW=12.5ppg, started leaking off, level @ 10.9ppg, (planned mud weight @ 8.8-9.6) decided to continue drilling ahead. 11/10/15 Drill 6-3/4" hole to 13900'M 8770'V 11/14/15. RIH & set split csg string w/ 4-1/2" 13.5# P110 @ 13886-8949' and 5-1/2" 20# P110 csg @ 8949-0'. Pump 40BFW tuned spacer then cmt w/ 610sx (173bbl) PPC w/ additives @ 13.2ppg 1.6 yield, full returns throughout job, no cmt to surface, WOC. ND BOP, Install wellhead & test to 5000#, good test. RD Rel Rig 11/15/15.

14. I hereby certify that the foregoing is true and correct.	
Electronic Submission #324015 verified by the BLM Well Information System For OXY USA INCORPORATED, sent to the Carlsbad Committed to AFMSS for processing by JENNIFER SANCHEZ on 11/20/2015 (16JAS1212SE)	
Name (Printed/Typed) DAVID STEWART	Title REGULATORY ADVISOR
Signature (Electronic Submission)	Date 11/18/2015

ACCEPTED FOR RECORD THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By /S/ DAVID R. GLASS		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	

Title 18 U.S.C. Section 1030 makes 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 ****