Form 3160-5 (June 2015)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

NMOCD Artesia

FORM APPROVED OMB NO. 1004-0137 31, 2018

	Expires:	January	3
Lease	Serial No.		

SUNDRY NOTICES AND	REPORTS ON WELLS	
Do not use this form for propo	osals to drill or to re-enter an	an

	NMNM86908	
6.	If Indian, Allottee or Tribe Name	

Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.						
				n, Allottee or Tr	ribe Name	
SUBMIT IN	RIPLICATE - Other instr	uctions on page 2	7. If Unit	or CA/Agreeme	nt, Name and/or No.	
Type of Well ☐ Gas Well ☐ Other				8. Well Name and No. CEDAR CANYON 21-22 FEDERAL COM 33		
2. Name of Operator OXY USA INC.	Contact: JANA MENDIOLA E-Mail: janalyn_mendiola@oxy.com			9. API Well No. 30-015-44133		
3a. Address P.O. BOX 50250 MIDLAND, TX 79710		3b. Phone No. (include area code) Ph: 432-685-5936		and Pool or Expl CE CROSSIN	loratory Area IG BN SPRG,E	
4. Location of Well (Footage, Sec., T	, R., M., or Survey Description)		11. Count	11. County or Parish, State		
Sec 21 T24S R29E NWSW 17 32.200496 N Lat, 103.996832	EDDY	EDDY COUNTY, NM				
12. CHECK THE AF	PROPRIATE BOX(ES)	TO INDICATE NATURE OF	NOTICE, REPORT	, OR OTHEI	R DATA	
TYPE OF SUBMISSION		TYPE OF	ACTION)N		
☐ Notice of Intent	☐ Acidize	☐ Deepen	☐ Production (Start/F	lesume) [☐ Water Shut-Off	
_	Alter Casing	☐ Hydraulic Fracturing	☐ Reclamation		☐ Well Integrity	
Subsequent Report	☐ Casing Repair	■ New Construction	☐ Recomplete		Other Drilling Operations	
☐ Final Abandonment Notice	☐ Change Plans	□ Plug and Abandon	☐ Temporarily Aban	don ^J		
	Convert to Injection	☐ Plug Back	■ Water Disposal			
3. Describe Proposed or Completed Ope If the proposal is to deepen directions Attach the Bond under which the wor following completion of the involved testing has been completed. Final At determined that the site is ready for f Spud 17-1/2" hole 5/10/17, dri 40BFW spacer w/ red dye the returns throughout job, circ 26 test. Install night cap and pre	ully or recomplete horizontally, good will be performed or provide to operations. If the operation respondence in the operation respondence in the operation in the operation in the operation. If to 542' 5/10/17. RIH & sent of the operation in	ive subsurface locations and measure Bond No. on file with Bl.M/BIA ults in a multiple completion or record only after all requirements, including a 13/3/8" 54.5# J-55 BTC csg PC W/ additives 14.8ppg 1.68 WOC. Install WH. test to 90	red and true vertical depths. Required subsequent reproperties in a new interval, ng reclamation, have been go 6 542, pump syield, full 10#. good	s of all pertinent orts must be file , a Form 3160-4 completed and	markers and zones. d within 30 days must be filed once the operator has	
	Accepted	- 7-20-17 for record - NMOCD			ARTESIA DISTRICT JUL 19 2017 RECEIVED	
14. I hereby certify that the foregoing is	Electronic Submission #3 For OX	76580 verified by the BLM Well 7 USA INC., sent to the Carlsb	ád /			

SR. REGULATORY ADVISOR Name (Printed/Typed) DAVID STEWART Title 05/1 Signature (Electronic Submission) Date THIS SPACE FOR FEDERAL OR STATE OFFICE USE JUL Approved By Title UREAU OF LAND I CARLSEAD FIE 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 villfully to make to any States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction. department or agency of the United

(Instructions on page 2)

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