

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTNMOCD  
ArtesiaFORM APPROVED  
OMB NO. 1004-0137  
Expires: January 31, 2018**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.*5. Lease Serial No.  
NMNM57273

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

**SUBMIT IN TRIPLICATE - Other instructions on page 2**

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other2. Name of Operator  
OXY USA INC.Contact: SARAH MITCHELL  
E-Mail: sarah\_mitchell@oxy.com8. Well Name and No.  
PALLADIUM MDP1 7-6 FEDERAL COM 2H9. API Well No.  
30-015-442993a. Address  
P.O. BOX 50250  
MIDLAND, TX 797103b. Phone No. (include area code)  
Ph: 432-699-431810. Field and Pool or Exploratory Area  
COTTON DRAW; BONE SPRING

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Sec 7 T24S R31E Mer NMP SWSW 609FSL 742FWL  
32.226265 N Lat, 103.823265 W Lon

11. County or Parish, State

EDDY COUNTY, NM

## 12. CHECK THE 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"/> Hydraulic Fracturing	<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	Drilling Operations
	<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 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 must 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 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

12/20/17 NU BOP, Test @ 250 psi low, 5000 psi high, good test. RIH & tag cmt @ 4252', drill new formation to 4325', perform FIT EMW= 9.8 PPG. Drill 8-1/2" hole to 20085'M, 10033'V (12/31/17). RIH & set 5-1/2" 20#, P110 DQX csg @ 20070', pump 100 BBLs spacer, then cmt w/ 308 sks (72 BBLs) PPC w/ additives, 13.2 PPG, 1.38 yield, followed by 2194 sks (514 BBLs), 13.2 PPG, 1.38 yield. Estimated TOC = 6500'. For second stage performed Bradenhead squeeze, pumping 50 BBLs FW, then cementing w/ 191 sks (43 BBLs) PPC w/ additives, 14.8 PPG, 1.33 yield, followed by 741 sks (245 BBLs) PPC w/ additives, 12.8 PPG, 1.76 yield, followed by 333 sks (76 BBLs) PPC w/ additives, 12.8 PPG, 1.76 yield. Ran echometer, TOC = 206'. ND BOP, install well cap, release rig (1/6/18).

3 who gave approval?

NM OIL CONSERVATION  
ARTESIA DISTRICT

FEB 14 2018

SC 2-15-18  
Accepted for record - NMOCD

RECEIVED

14. I hereby certify that the foregoing is true and correct.

Electronic Submission #400080 verified by the BLM Well Information System  
For OXY USA INC., sent to the Carlsbad  
Committed to AFMSS for processing by JENNIFER SANCHEZ on 01/10/2018 ()

Name (Printed/Typed) DAVID STEWART

Title SR. REGULATORY ADVISOR

Signature (Electronic Submission)

Date 01/09/2018

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

BUREAU OF LAND MANAGEMENT  
CARLSBAD FIELD 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.

(Instructions on page 2)

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