

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.

8. Well Name and No.
PALLADIUM MDP1 7-6 FEDERAL COM 6H9. API Well No.
30-015-4429310. Field and Pool or Exploratory Area
COTTON DRAW; BONE SPRING11. County or Parish, State
EDDY COUNTY, NM**SUBMIT IN TRIPLICATE - Other instructions on page 2**1. Type of Well
☒ Oil Well ☐ Gas Well ☐ Other2. Name of Operator
OXY USA INC.
Contact: JANA MENDIOLA
E-Mail: janalyn_mendiola@oxy.com3a. Address
P.O. BOX 50250
MIDLAND, TX 79710
3b. Phone No. (include area code)
Ph: 432-685-59364. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 7 T24S R31E SESE 293FSL 562FEL
32.225398 N Lat, 103.810207 W Lon**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
	<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 must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletable 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.

RUPU 10/12/17, RIH & clean out to PBTD @ 20021', pressure test csg to 9500# for 30 min, good test. RIH & perf @ 19910-19753, 19703-19546, 19496-19339, 19290-19138, 19083-18926, 18877-18720, 18670-18516, 18463-18306, 18257-18100, 18050-17893, 17843-17646, 17636-17482, 17430-17273, 17223-17066, 17016-16859, 16810-16653, 16603-16448, 16396-16239, 16190-16033, 15983-15826, 15776-15619, 15570-15413, 15360-15210, 15156-14999, 14950-14793, 14743-14586, 14532-14379, 14329-14169, 14123-13966, 13916-13759, 13709-13552, 13503-13346, 13296-13140, 13089-12932, 12883-12726, 12676-12519, 12471-12312, 12263-12110, 12056-11899, 11849-11692, 11643-11486, 11436-11279, 11229-11072, 11023-10866, 10816-10659, 10609-10452, 10404-10253, 10204-10058' Total 1920 holes. Frac in 48 stages w/ 18071363g Slick Water + 60423g 15% HCl acid w/ 18669694# sand, RD Schlumberger 11/4/17. RIH & clean out, flow to clean up and test well for potential.

OIL CONSERVATION
ARTESIA DISTRICT

MAR 12 2018

RECEIVED

OC 3-13-18
Accepted for record - NMOCD

14. I hereby certify that the foregoing is true and correct. Electronic Submission #405056 verified by the BLM Well Information System For OXY USA INC., sent to the Carlsbad Committed to AFMSS for processing by JENNIFER SANCHEZ on 02/28/2018 ()	
Name (Printed/Typed) DAVID STEWART	Title SR. REGULATORY ADVISOR
Signature (Electronic Submission)	Date 02/20/2018
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 _____
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 **