

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD Artesia

FORM APPROVED
OMB No. 1004-0137
Expires: July 31, 2010

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

5. Lease Serial No. NMNM88139
6. If Indian, Allottee or Tribe Name
7. Unit or CA Agreement Name and No.
8. Lease Name and Well No. CORRAL FLY 35-26 FEDERAL COM 22H
9. API Well No. 30-015-44703-00-S1
10. Field and Pool, or Exploratory PIERCE CROSSING-BONE SPRING, E
11. Sec., T., R., M., or Block and Survey or Area Sec 2 T25S R29E Mer NMP
12. County or Parish EDDY
13. State NM
17. Elevations (DF, KB, RT, GL)* 3018 GL
18. Total Depth: MD 19410 TVD 8930
19. Plug Back T.D.: MD 19345 TVD 8929
20. Depth Bridge Plug Set: MD TVD
21. Type Electric & Other Mechanical Logs Run (Submit copy of each) MUDLOG
22. Was well cored? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Was DST run? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Directional Survey? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (Submit analysis)

23. Casing and Liner Record (Report all strings set in well)

Hole Size	Size/Grade	Wt. (#/ft.)	Top (MD)	Bottom (MD)	Stage Cementer Depth	No. of Sk. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
14.750	10.750 J55	45.5	0	382		836	198	0	
9.875	7.625 L80	26.4	0	8302	3217	1869	611	0	
6.750	5.500 P110	20.0	0	19394		882	218	7802	

24. Tubing Record

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)

25. Producing Intervals

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) BONE SPRING 2ND			9373 TO 19248	0.370	1200	ACTIVE
B)						
C)						
D)						

27. Acid, Fracture, Treatment, Cement Squeeze, Etc.

Depth Interval	Amount and Type of Material
9373 TO 19248	12138924G SLICKWATER W/ 15010664# SAND

DISTRICT II-ARTESIA O.C.D.

28. Production - Interval A

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
07/22/2018	09/24/2018	24	→	3759.0	6600.0	3245.0			FLOW FROM WELL
Choke Size	Tbg. Press. Flwg.	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
108/128	SI	790.0	→	3759	6600	3245	1756	PDW	ACCEPTED FOR RECORD
28a. Production - Interval B									
Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						NOV 17 2013
Choke Size	Tbg. Press. Flwg.	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
SI			→						BUREAU OF LAND MANAGEMENT CARLSBAD FIELD OFFICE

(See Instructions and spaces for additional data on reverse side)

ELECTRONIC SUBMISSION #438792 VERIFIED BY THE BLM WELL INFORMATION SYSTEM

** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED **

Reclamation Due: 1/20/2019

28b. Production - Interval C

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
			→						

28c. Production - Interval D

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
			→						

29. Disposition of Gas(Sold, used for fuel, vented, etc.)

SOLD

30. Summary of Porous Zones (Include Aquifers):

Show all important zones of porosity and contents thereof: Cored intervals and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures and recoveries.

31. Formation (Log) Markers

Formation	Top	Bottom	Descriptions, Contents, etc.	Name	Top Meas. Depth
BELL CANYON	3184	4024	OIL, GAS, WATER	RUSTLER	263
CHERRY CANYON	4025	5381	OIL, GAS, WATER	SALADO	588
BRUSHY CANYON	5382	6893	OIL, GAS, WATER	CASTILE	1669
BONE SPRING	6894	7873	OIL, GAS, WATER	DELAWARE	3134
BONE SPRING 1ST	7874	8739	OIL, GAS, WATER	BELL CANYON	3184
BONE SPRING 2ND	8740	8930	OIL, GAS, WATER	CHERRY CANYON	4025
				BRUSHY CANYON	5382
				BONE SPRING	6894

32. Additional remarks (include plugging procedure):

52. FORMATION (LOG) MARKERS CONTD.

1ST BONE SPRINGS 7874'M
2ND BONE SPRINGS 8740'M

Logs were mailed 10/9/18.

33. Circle enclosed attachments:

- | | | | |
|---|--------------------|---------------|-----------------------|
| 1. Electrical/Mechanical Logs (1 full set req'd.) | 2. Geologic Report | 3. DST Report | 4. Directional Survey |
| 5. Sundry Notice for plugging and cement verification | 6. Core Analysis | 7 Other: | |

34. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records (see attached instructions):

Electronic Submission #438792 Verified by the BLM Well Information System.
For OXY USA INCORPORATED, sent to the Carlsbad
Committed to AFMSS for processing by DUNCAN WHITLOCK on 10/10/2018 (19DW0019SE)

Name (please print) DAVID STEWART

Title REGULATORY ADVISOR

Signature (Electronic Submission)

Date 10/09/2018

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.

**** REVISED ** REVISED ** REVISED ** REVISED ** REVISED ** REVISED ** REVISED ** REVISED ****

Additional data for transaction #438792 that would not fit on the form

32. Additional remarks, continued

Log Header, Directional Survey, As-Drilled Amended C-102 plat & WBD are attached.

District I
1623 N. Francis Dr., Hobbs, NM 88240
Phone: (575) 393-0161 Fax: (575) 393-0720
District II
811 S. First St., Artesia, NM 88210
Phone: (575) 748-1200 Fax: (575) 748-0720
District III
1000 Rio Bruno Road, Aztec, NM 87410
Phone: (505) 334-6178 Fax: (505) 334-6170
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505
Phone: (505) 475-3460 Fax: (505) 475-3452

State of New Mexico
Energy, Minerals & Natural Resources Department
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-102
Revised August 1, 2011
Submit one copy to appropriate
District Office

☒ AMENDED REPORT
(As-Drilled)

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30-015-44703	Pool Code 96473	Pool Name Pierce Crossing Bone Spring, East
Property Code 320767	Property Name CORRAL FLY "35-26" FEDERAL COM	Well Number 22H
OGRID No. 16696	Operator Name OXY USA INC.	Elevation 3018.2'

Surface Location

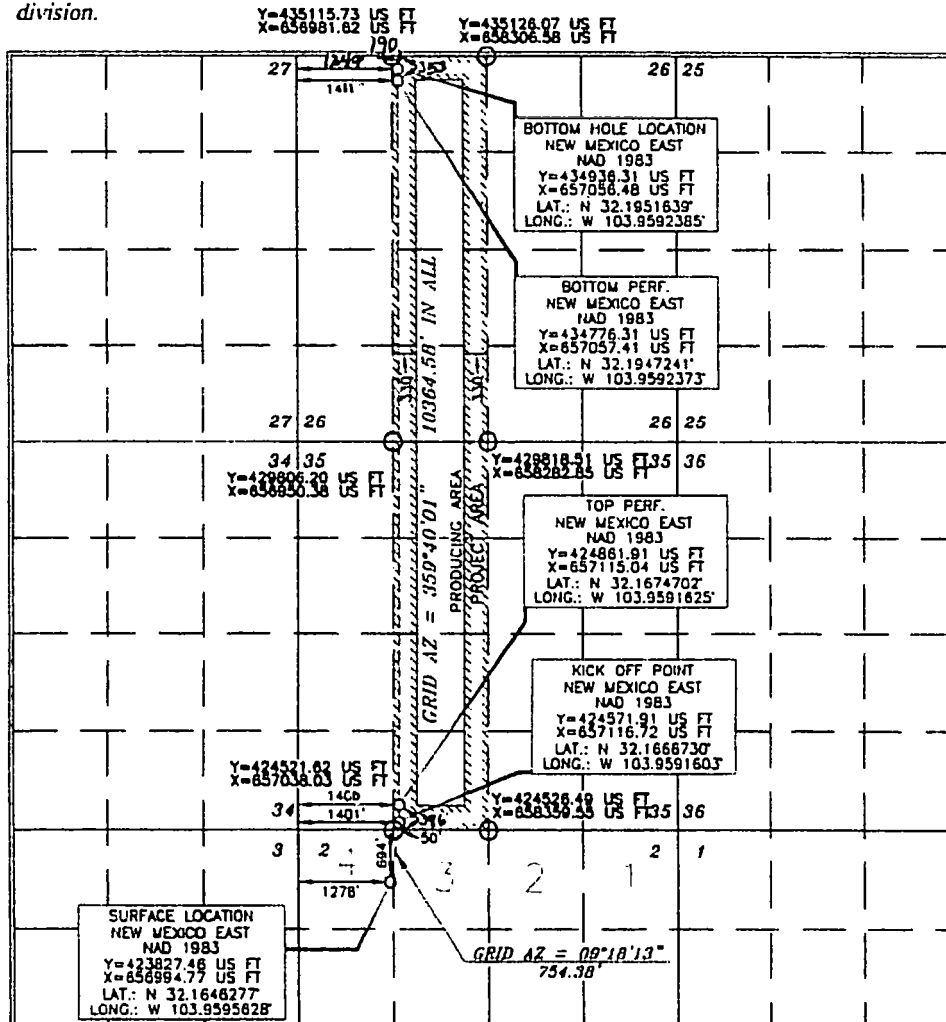
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
4	2	25 SOUTH	29 EAST, N.M.P.M.		694'	NORTH	1278'	WEST	EDDY

Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
C	26	24 SOUTH	29 EAST, N.M.P.M.		190'	NORTH	1347'	WEST	EDDY

Dedicated Acres 320	Joint or Infill Y	Consolidation Code	Order No. NSL-7705	BP - 353 FNL 1411 FWL TP - 386 FSL 1400 FWL
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No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.



OPERATOR CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or undivided mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or as a voluntary pooling agreement or a compulsory pooling order.

Agency use only by the Division

[Signature] 7/12/13
Signature Date
Jana Mendiola
Printed Name
janelan_mendiola@oxy.com
E-mail Address

SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same are true and correct to the best of my belief.

[Signature] 7/10/2017
Date of Survey
Professional Surveyor
Certificate Number 15079