

District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 S. First St., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals & Natural Resources

Form C-104
Revised August 1, 2011

Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Submit one copy to appropriate District Office

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address OXY USA INC. P.O. BOX 50250 MIDLAND, TX 79710		² OGRID Number 16696
		³ Reason for Filing Code/ Effective Date - NW
⁴ API Number 30 - 015-44519	⁵ Pool Name PIERCE CROSSING BONE SPRING	⁶ Pool Code 50371
⁷ Property Code: 319809	⁸ Property Name: CEDAR CANYON 20 FEDERAL COM	⁹ Well Number: 25H

II. ¹⁰ Surface Location

Ul or lot no. B	Section 29	Township 24S	Range 29E	Lot Idn	Feet from the 110	North/South Line NORTH	Feet from the 1390	East/West line EAST	County EDDY
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¹¹ Bottom Hole Location FTP- 354' FSL 1377' FEL LTP- 201' FNL 1351' FEL

UL or lot no. J	Section 17	Township 24S	Range 29E	Lot Idn	Feet from the 43	North/South line NORTH	Feet from the 1350	East/West line EAST	County EDDY
¹² Lse Code F	¹³ Producing Method Code : F	¹⁴ Gas Connection Date: 9-22-18	¹⁵ C-129 Permit Number	¹⁶ C-129 Effective Date	¹⁷ C-129 Expiration Date				

III. Oil and Gas Transporters

**NSPA R-14726

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address	²⁰ O/G/W
214754	LPC CRUDE OIL, INC.	O
151618	ENTERPRISE FIELD SERVICES LLC OIL CONSERVATION ARTESIA DISTRICT	G
	DEC 12 2018	
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IV. Well Completion Data

²¹ Spud Date 5/17/18	²² Ready Date 9/22/18	²³ TD 16200'M 8671'V	²⁴ PBD 16137'M 8671'V	²⁵ Perforations 8605-16042'	²⁶ DHC, MC
²⁷ Hole Size	²⁸ Casing & Tubing Size	²⁹ Depth Set	³⁰ Sucks Cement		
14-3/4"	10-3/4"	412'	1138		
9-7/8"	7-5/8"	8034'	1547		
6-3/4"	5-1/2" x 4-1/2"	16188'	943		
		4 1/2" - 8557 - 16188			
		5 1/2" - 0 - 8557			

V. Well Test Data

³¹ Date New Oil 9-22-18	³² Gas Delivery Date 9-22-18	³³ Test Date 10/10/18	³⁴ Test Length 24 hrs.	³⁵ Tbg. Pressure	³⁶ Csg. Pressure 1227
³⁷ Choke Size 64/128	³⁸ Oil 2946	³⁹ Water 2619	⁴⁰ Gas 4075		⁴¹ Test Method F

⁴² I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature:

Printed name:
Jana Mendiola

Title:
Regulatory Specialist

E-mail Address:
Janalyn_mendiola@oxy.com

Date: 12/11/2018

Phone: 432-685-5936

Approved by:

Title:

Approval Date:

OIL CONSERVATION DIVISION

Rusty Kline
Business Ops Spec A
12-12-2018

Pending BLM approvals will
subsequently be reviewed
and scanned

**NM OIL CONCENTRATION
ARTESIA DISTRICT**

DEC 12 2018

Form 3160-4
(August 2007)

**UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT**

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

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WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Dry <input type="checkbox"/> Other		5. Lease Serial No. NMNM94651	
b. Type of Completion <input checked="" type="checkbox"/> New Well <input type="checkbox"/> Work Over <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Diff. Resvr. Other _____		6. If Indian, Allottee or Tribe Name	
2. Name of Operator OXY USA INC.		7. Unit or CA Agreement Name and No.	
Contact: JANA MENDIOLA E-Mail: janalyn_mendiola@oxy.com		8. Lease Name and Well No. CEDAR CANYON 20 FEDERAL COM 25H	
3. Address P.O. BOX 50250 MIDLAND, TX 79710		9. API Well No. 30-015-44519	
3a. Phone No. (include area code) Ph: 432-685-5936		10. Field and Pool, or Exploratory PIERCE CROSSING BONE SPRG	
4. Location of Well (Report location clearly and in accordance with Federal requirements)* Sec 29 T24S R29E Mer NMP At surface NWNE 110FNL 1390FEL 32.195397 N Lat, 104.002564 W Lon Sec 20 T24S R29E Mer NMP At top prod interval reported below SWSE 354FSL 1377FEL 32.196670 N Lat, 104.002520 W Lon Sec 17 T24S R29E Mer NMP At total depth NWSE 43FNL 1350FEL 32.217470 N Lat, 104.002360 W Lon		11. Sec., T., R., M., or Block and Survey or Area Sec 29 T24S R29E Mer NMP	
12. County or Parish EDDY		13. State NM	
14. Date Spudded 05/17/2018		15. Date T.D. Reached 07/27/2018	
16. Date Completed <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod. 09/22/2018		17. Elevations (DF, KB, RT, GL)* 2954 GL	
18. Total Depth: MD 16200 TVD 8871		19. Plug Back T.D.: MD 16137 TVD 8671	
20. Depth Bridge Plug Set: MD TVD		21. Type Electric & Other Mechanical Logs Run (Submit copy of each) CBL	
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	412		1138	274	0	
9.875	7.625 L80	29.7	0	8034	2908	1547	544	0	
6.750	5.500 P110	20.0	0	8557		943	233	5550	
6.750	4.500 P110	13.5	8557	16188		943	233	5550	

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) 2ND BONE SPRINGS	8605	16042	8605 TO 16042	0.420	912	ACTIVE
B)						
C)						
D)						

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

Depth Interval	Amount and Type of Material
8605 TO 16042	9824346G SLICKWATER + 2250G 15% HCL ACID W/ 11417283# SAND

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
09/22/2018	10/10/2018	24	→	2946.0	4075.0	2619.0			FLows FROM WELL
Choke Size	Tbg. Press Plug SI	Csg. Press	24 Hr Rate	Oil BBL	Gas MCF	Water BBL	Gas Oil Ratio	Well Status	
64/128	SI	1227.0	→	2946	4075	2619	1383	POW	

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
			→						
Choke Size	Tbg. Press Plug SI	Csg. Press	24 Hr Rate	Oil BBL	Gas MCF	Water BBL	Gas Oil Ratio		
			→						

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

ELECTRONIC SUBMISSION #447307 VERIFIED BY THE BLM WELL INFORMATION SYSTEM.

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

Pending BLM approvals will
subsequently be reviewed
and scanned

... ED **

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	2930	3792	OIL, GAS, WATER	RUSTLER	340
CHERRY CANYON	3793	5022	OIL, GAS, WATER	SALADO	615
BRUSHY CANYON	5023	6668	OIL, GAS, WATER	CASTILE	1330
BONE SPRING	6669	7587	OIL, GAS, WATER	DELAWARE	2892
1ST BONE SPRINGS	7588	8469	OIL, GAS, WATER	BELL CANYON	2930
2ND BONE SPRINGS	8470	8671	OIL, GAS, WATER	CHERRY CANYON	3793
				BRUSHY CANYON	5023
				BONE SPRING	6669

32. Additional remarks (include plugging procedure):

52. FORMATION (LOG) MARKERS CONTD.

1ST BONE SPRINGS 7588'M
2ND BONE SPRINGS 8470'M

Logs were mailed 12/12/18.

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 #447307 Verified by the BLM Well Information System.
For OXY USA INC., sent to the Carlsbad

Name (please print) DAVID STEWART

Title SR. REGULATORY ADVISOR

Signature (Electronic Submission)

Date 12/11/2018

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.

**** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL ****

Additional data for transaction #447307 that would not fit on the form

32. Additional remarks, continued

Log Header, Directional Survey (certified copy to follow), As-Drilled Amended C-102 plat & VBD are attached.

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

DEC 12 2018

FORM 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.

RECEIVED

5. Lease Serial No. NMNM94651
6. If Indian, Allottee or Tribe Name
7. If Unit or CA/Agreement, Name and/or No.
8. Well Name and No. CEDAR CANYON 20 FEDERAL COM 25H
9. API Well No. 30-015-44519
10. Field and Pool or Exploratory Area PIERCE CROSSING; BONE SPG
11. County or Parish, State EDDY COUNTY, NM

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	2. Name of Operator OXY USA INC.	Contact: JANA MENDIOLA E-Mail: janalyn_mendiola@oxy.com
3a. Address P.O. BOX 50250 MIDLAND, TX 79710	3b. Phone No. (include area code) Ph: 432-685-5936	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 29 T24S R29E Mer NMP NWNE 110FNL 1390FEL 32.195396 N Lat, 104.002564 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 Workover Operations
	<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 recomplete 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 recompletion 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 8/17/18, RIH & clean out to PBTD @ 16137', pressure test csg to 9800# for 30 min, good test. RIH & perf @ 16042-15892, 15844-15697, 15647-15500, 15450-15303, 15253-15106, 15056-14909, 14859-14712, 14622-14515, 14466-14318, 14268-14119, 14071-13924, 13876-13727, 13677-13528, 13480-13333, 13283-13136, 13086-12942, 12889-12742, 12692-12545, 12496-12348, 12298-12149, 12101-11954, 11907-11757, 11707-11560, 11508-11363, 11313-11166, 11116-10969, 10915-10772, 10722-10575, 10525-10378, 10328-10181, 10131-9982, 9934-9787, 9737-9590, 9540-9396, 9343-9196, 9146-8999, 8949-8812, 8757-8605' Total 912 holes. Frac in 38 stages w/ 9824346g Slick Water + 2250g 15% HCl Acid w/ 11417283# sand, RD Schlumberger 9/7/18. RIH & clean out, flow to clean up and test well for potential.

14. I hereby certify that the foregoing is true and correct. Electronic Submission #447308 verified by the BLM Well Information System For OXY USA INC., sent to the Carlsbad	
Name (Printed/Typed) DAVID STEWART	Title SR. REGULATORY ADVISOR
Signature (Electronic Submission)	Date 12/11/2018

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____	Title _____
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 _____

Pending BLM approvals will
subsequently be reviewed
and scanned

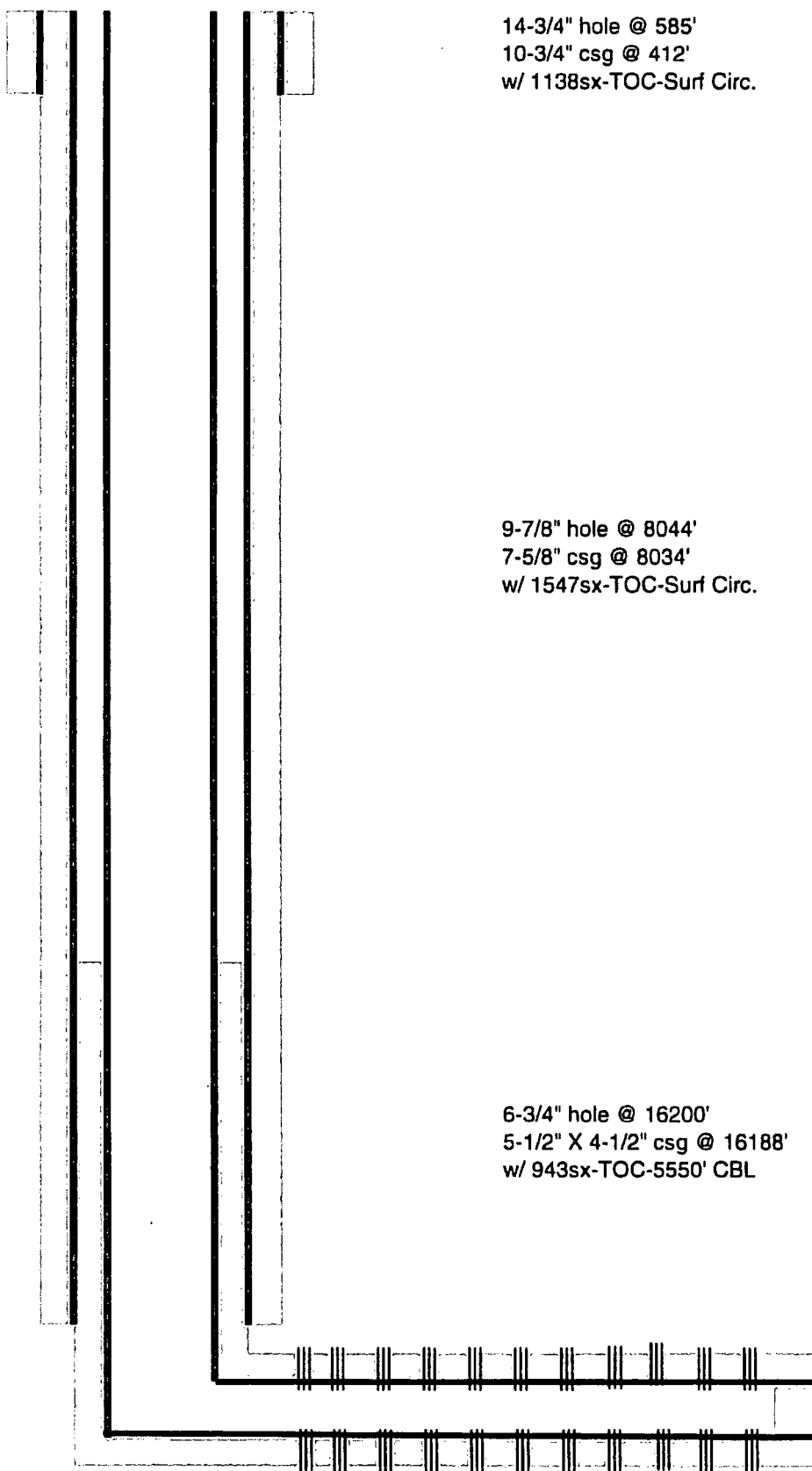
Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

Department or agency of the United

(Instructions on page 2)

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

OXY USA Inc.
Cedar Canyon 20 Federal Com 25H
API No. 30-015-44519



14-3/4" hole @ 585'
10-3/4" csg @ 412'
w/ 1138sx-TOC-Surf Circ.

9-7/8" hole @ 8044'
7-5/8" csg @ 8034'
w/ 1547sx-TOC-Surf Circ.

6-3/4" hole @ 16200'
5-1/2" X 4-1/2" csg @ 16188'
w/ 943sx-TOC-5550' CBL

Perfs @ 8605-16042'

TD- 16200'M 8671'V