

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NM OIL CONSERVATION
ARTESIA DISTRICT

FORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 2018

SUNDRY NOTICES AND REPORTS ON WELLS JAN 08 2019
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

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		5. Lease Serial No. NMNM40659
2. Name of Operator OXY USA INC.		6. If Indian, Allottee or Tribe Name
3a. Address P.O. BOX 4294 HOUSTON, TX 77210		7. If Unit or CA/Agreement, Name and/or No.
3b. Phone No. (include area code) Ph: 713-350-4997		8. Well Name and No. IRIDIUM MDP1 28-21 FEDERAL COM 41H
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 28 T23S R31E Mer NMP SWSW 610FSL 683FWL 32.269856 N Lat, 103.789083 W Lon		9. API Well No. 30-015-45075
		10. Field and Pool or Exploratory Area INGLE WELLS BONE SPRING
		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 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 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.

RUPU 12/03/18, RIH & cleanout to PBTD @ 18013', pressure test 5-1/2" csg to 9800# for 30 minutes, good test. RIH & perf @ 17951-17798, 17748-17595, 17547-17392, 17342-17187, 17139-16987, 16936-16783, 16733-16579, 16530-16377, 16327-16174, 16124-15971, 15923-15768, 15718-15570, 15515-15362, 15313-15159, 15110-14956, 14908-14753, 14703-14553, 14498-14347, 14297-14141, 14086-13940, 13891-13738, 13688-13535, 13485-13332, 13282-13129, 13079-12929, 12876-12723, 12673-12520, 12470-12317, 12259-12112, 12056-11909, 11848-11706, 11658-11501, 11455-11302, 11252-11098, 11049-10896, 10790-10693, 10643-10490, 10435-10287, 10237-10089, 10034-9881, 9831-9676, 9628-9475. Frac in 42 stags w/ 13499430 gal Slick Water, 5940gal 15% HCl acid w/ 16819107# sand. RD Schlumberger 12/18/18, turn well over to production for clean out, flowback and test.

14. I hereby certify that the foregoing is true and correct. Electronic Submission #449096 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 01/07/2019

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

1-8-2019

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

any department or agency of the United States

(Instructions on page 2)

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