

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED

MAY 15 2019

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

WELL COMPLETION OR RECOMPLETION REPORT AND REPORTESIAO.C.D.

1a. 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. NMNM43744		
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.		
3. Address P.O. BOX 4294 HOUSTON, TX 77210			8. Lease Name and Well No. PLATINUM MDP1 34-3 FEDERAL COM 6H		
3a. Phone No. (include area code) Ph: 713-350-4997			9. API Well No. 30-015-45172		
4. Location of Well (Report location clearly and in accordance with Federal requirements)* Sec 34 T23S R31E Mer At surface NENE 110FNL 933FEL 32.267886 N Lat, 103.765709 W Lon Sec 3 T23S R31E Mer At top prod interval reported below SESE 160FSL 394FEL 32.237580 N Lat, 103.758580 W Lon Sec 3 T23S R31E Mer At total depth SESE 20FSL 393FEL 32.239642 N Lat, 103.758566 W Lon			10. Field and Pool, or Exploratory INGLE WELLS BONE SPRING		
14. Date Spudded 09/16/2018			11. Sec., T., R., M., or Block and Survey or Area Sec 34 T23S R31E Mer		
15. Date T.D. Reached 11/13/2018			12. County or Parish EDDY		
16. Date Completed <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod. 01/23/2019			13. State NM		
17. Elevations (DF, KB, RT, GL)* 3445 GL					
18. Total Depth: MD 20295 TVD 10011			19. Plug Back T.D.: MD 20245 TVD 10011		
20. Depth Bridge Plug Set: MD TVD					
21. Type Electric & Other Mechanical Logs Run (Submit copy of each) GAMMA RAY AND 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 checked="" type="checkbox"/> No <input 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
17.500	13.375 J55	54.5	0	685		900	218	0	
12.250	9.625 L80	43.5	0	4488		1507	448	0	
8.500	7.625 HCL80	26.4	0	9613		670	217	7	
6.750	5.500 P110	20.0	0	20285		822	203	9100	

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

26. Perforation Record

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A)			9959 TO 20155	0.420	1200	ACTIVE
B)						
C)						
D)						

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

Depth Interval	Amount and Type of Material
9959 TO 20155	13097700GAL SLICK WATER, 3000GAL 7.5% ACID W/ 20038742# 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
02/12/2019	03/10/2019	24	→	2821.0	3769.0	3947.0			FLows FROM WELL
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
128/128	SI	485.0	→	2821	3769	3947		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. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
	SI		→						

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

ELECTRONIC SUBMISSION #464971 VERIFIED BY THE BLM WELL INFORMATION SYSTEM

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

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	4367	5253	OIL, GAS, WATER	RUSTLER	734
CHERRY CANYON	5283	6336	OIL, GAS, WATER	SALADO	973
BRUSHY CANYON	6477	8184	OIL, GAS, WATER	CASTILE	2865
BONE SPRING	8204	9022	OIL, GAS, WATER	DELAWARE	4326
BONE SPRING 1ST	9045	9499	OIL, GAS, WATER	BELL CANYON	4352
BONE SPRING 2ND	9529	10008	OIL, GAS, WATER	CHERRY CANYON	5283
				BRUSHY CANYON	6477
				BONE SPRING	8204

32. Additional remarks (include plugging procedure):

LOG HEADER, DIRECTIONAL SURVEY, AS-DRILLED C-102 PLAT AND WBD ARE ATTACHED.

EC Tran 464959 was submitted by mistake, this is the correct information for Platinum MDP1 34-3 Federal Com 6H.

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 #464971 Verified by the BLM Well Information System.
For OXY USA INC., sent to the Carlsbad

Name (please print) SARAH CHAPMAN

Title REGULATORY SPECIALIST

Signature (Electronic Submission)

Date 05/13/2019

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.

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