



U.S. Department of the Interior  
BUREAU OF LAND MANAGEMENT

# Well Completion Print

07/08/2025

<b>Operator Name</b> OXY USA INCORPORATED	<b>Well Name</b> DR PI UNIT	<b>Well Number</b> 173H	<b>US Well Number</b> 3002548953
<b>SHL</b> SWSE Sec 17 22S 32E	<b>County</b> EDDY	<b>State</b> NM	<b>Lease Number(s)</b> NMNM128362
<b>Well Type</b> OIL WELL	<b>Well Status</b> Producing Oil Well	<b>Agreement Name</b>	<b>Agreement Number(s)</b> NMNM143828X
<b>Allottee/Tribe Name</b>	<b>Well Pad Name</b> Dr. Awkward 17-8 Federal Com	<b>Well Pad Number</b> 73H	<b>APD ID</b> 10400051440

## Section 1 - General

**Well Completion Report Id:** 93468**Submission Date:** 10-28-2024**BLM Office:** Carlsbad Field Office**User:** SANDY SEUTTER**Title:** Regulatory**Federal/Indian:** FEDERAL**Lease Number:** NMNM128362**Lease Acres:****Agreement in place?:** YES**Federal or Indian Agreement:** FEDERAL**Agreement Number:****Agreement Name:****Additional Information****Keep this Well Completion Report confidential?:** NO**APD Operator:** OXY USA  
INCORPORATED

## Section 2 - Well

**Field/Pool or Exploratory:****Pool Name:** BONE SPRING, SOUTH**Field Name:** BILBERY BASIN**Well Type:** OIL WELL**Spud Date:** 04-27-2024**Date Total Measured Depth Reached:** 06-12-2024**Drill & Abandon or Ready To Produce:** READY TO PRODUCE**Well Class:** HORIZONTAL

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### Section 3 - Geologic

Formation Name	Lithology	Describe Lithology	Elevation	TVD	MD	Mineral Resources	Describe Mineral
RUSTLER	ANHYDRITE, DOLOMITE, SHALE		2796	910	910	USEABLE WATER	
SALADO	ANHYDRITE, DOLOMITE, HALITE, SHALE		2491	1215	1215	OTHER	SALT
CASTILE	ANHYDRITE		410	3295	3300	OTHER	SALT
LAMAR	LIMESTONE, SANDSTONE, SILTSTONE		-1048	4755	4781	NATURAL GAS, OIL, OTHER	OIL/GAS/BRINE
BELL CANYON	SANDSTONE, SILTSTONE		-1088	4794	4820	NATURAL GAS, OIL, OTHER	OIL/GAS/BRINE
CHERRY CANYON	SANDSTONE, SILTSTONE		-1952	5658	5693	NATURAL GAS, OIL, OTHER	OIL/GAS/BRINE
BRUSHY CANYON	SANDSTONE, SILTSTONE		-3228	6934	6980	NATURAL GAS, OIL, OTHER	OIL/GAS/BRINE
BONE SPRING	LIMESTONE, SANDSTONE, SILTSTONE		-4909	8615	8674	NATURAL GAS, OIL	
BONE SPRING 1ST	LIMESTONE, SANDSTONE, SILTSTONE		-5928	9635	9702	NATURAL GAS, OIL	

### Completion and Completed

#### Completion Data

Wellbore Code	Completion Code	Interval Number	Case Number	Lease Number	Well Completion Type	Describe Well Completion Type	Completion Status	Date Completed	Date First Produced	Formation	Interval Top (MD)	Interval Bottom (MD)	Interval Perforated?	Perforation Size	Number of Holes	Status of Interval
00	S1	1	NMNM143828X	NMNM128362	NEW		POW	07-06-2024	07-14-2024	BONE SPRING 1ST	10027	20136	Y	.42	1221	OPEN

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### Treatment Data

Wellbore Code	Completion Code	Interval Number	Interval Treated?	Treatment Type	Tottle Fluid (bbls)	Total Proppant (lbs)	Treatment Remarks
00	S1	1	Y	FRAC	399653	24735807	Frac in 37 stages w/ 387452 bbls Produced Water + 12201 bbls Brackish Water (> 1,000 mg/l TDS and 10,000 mg/l TDS) w/ 24735807# sand.

### Production Data

Wellbore Code	Completion Code	Interval Number	API Oil Gravity	Gas Gravity	Production Method	Describe Production	Disposition of Gas	Describe Disposition
00	S1	1			GAS LIFT		SOLD	

### Test Data

Wellbore Code	Completion Code	Interval Number	Test Date	Hours Tested	24-Hour Rate Oil (bbls)	24-Hour Rate Gas (MCF)	24-Hour Rate Water(BWPD)	Gas-Oil Ratio (SCF/Bbl)	Choke Size	Tubing Pressure	Tubing Pressure Shut-In (psi)	Casing Pressure (psi)
00	S1	1	08/06/20 24	24	2553	2805	3183	1098				293

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### Well Location

Survey Type: RECTANGULAR

Survey Number:

Datum: NAD83

Vertical Datum: NAVD88

Reference Datum: GL

	State	Meridian	County	Latitude	Longitude	Elevation (MSL)	MD (ft)	TVD (ft)	Lease Type	Lease Number	Plug TVD (ft)	Plug MD (ft)	Plug Type	NS-Foot	NS-Indicator	EW-Foot	EW-Indicator	Township	Range	Section	Aliquo/Lot/Tract
SHL	NEW MEXICO	NEW MEXICO PRINCIPAL	EDDY	32.38706	-103.692777	3667	N/A	N/A	FEDERAL	NMNM128362				979	FSL	1405	FEL	22S	32E	17	SWSE
KOP Well bore 00	NEW MEXICO	NEW MEXICO PRINCIPAL	EDDY	32.384784	-103.693579	-5713	9440	9380	FEDERAL	NMNM128362				152	FSL	1654	FEL	22S	32E	17	SWSE
PPP Well bore 00	NEW MEXICO	NEW MEXICO PRINCIPAL	EDDY	32.385344	-103.693816	-6241	10027	9908	FEDERAL	NMNM128362				356	FSL	1726	FEL	22S	32E	8	SWSE
EXIT Well bore 00	NEW MEXICO	NEW MEXICO PRINCIPAL	EDDY	32.412849	-103.694611	-6494	20136	10161	FEDERAL	NMNM90586				200	FNL	1960	FEL	22S	32E	8	NWNE
BHL Well bore 00	NEW MEXICO	NEW MEXICO PRINCIPAL	EDDY	32.413187	-103.694654	-6496	20260	10163	FEDERAL	NMNM90586				76	FNL	1973	FEL	22S	32E	8	NWNE

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### Casing, Liner and Tubing

### Casing and Liner

Wellbore Code	Casing String Type	Hole Size	Top Setting Depth (MD)	Bottom Setting Depth (MD)	Casing Size	Wt(lbs/ft)	Casing Grade	Describe Other Casing Grade	Joint	Other Joint	Amount Pulled (ft)
00	SURFACE	17.5	0	1102	13.375	54.5	J-55		BUTT		
00	INTERMEDIATE	9.875	0	9400	7.625	26.4	HCL-80		BUTT		
00	PRODUCTION	6.75	0	20240	5.5	20	P-110		OTHER	WEDGE 461	

### Cementing

Wellbore Code	Casing String Type	Stage Tool Depth	Cement Lead Type	Cement Lead Qty (sks)	Cement Lead Yield (cu.ft/sks)	Cement Lead Top (MD)	Cement Tail Type	Cement Tail Qty (sks)	Cement Tail Yield(cu.ft/sks)	Cement Tail Top (MD)	Total (Lead + Tail) Cement Slurry Volume
00	SURFACE		CI C	897	1.34	0					214.1
00	INTERMEDIATE		CI C	1098	1.72	0	CI C	312	1.91	0	1817.3
00	INTERMEDIATE		CI H	743	2.59	0	CI H	384	1.35	0	1817.3
00	PRODUCTION		CI C	75	2.99	0	CI C	587	1.84	8392	232.3

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Tubing

Wellbore Code	Tubing Size	Describe Other	Tubing Setting Depth (MD/ft)	Packer Depth (MD/ft)	Tubing Weight	Tubing Grade	Describe Other	Tubing Coupling	Describe Other
00	2.375		9994		4	L-80			

Logs

Wellbore Code	Log Upload	Was Well Cored?	Was DST Run?	Directional Survey?	Geologic Report	Wellbore Diagram
00	YES	NO	NO	YES	NO	YES

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Operator

I hereby certify that the foregoing and attached information is complete and correct as determined from all available records. 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 any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction. Electronic submission of Well Completion Reports through this system satisfies regulations requiring a submission of Form 3160-4 or a Well Completion Report.

**Name:** OXY USA INCORPORATED

<b>Signed By:</b> SANDY SEUTTER	<b>Title:</b> Regulatory	<b>Signed on:</b> 10/24/2024
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**Street Address:** 1600 GEHRING DR

<b>City:</b> MIDLAND	<b>State:</b> TX	<b>Zip:</b> 79706
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**Phone:** (432)247-3837

**Email address:** SANDY\_SEUTTER@OXY.COM

Field

**Representative Name:**

**Street Address:**

<b>City:</b>	<b>State:</b>	<b>Zip:</b>
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<b>Phone:</b>	<b>Extension:</b>
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**Email address:**

Attachments

- DrPiUnit173H\_AsDrilledC102\_20241024134228.pdf
- DrPiUnit173H\_CBL\_20241024134230.pdf
- DrPiUnit173H\_FinalDirectionalSurvey\_20241024134254.pdf
- DrPiUnit173H\_WBD\_20241024134303.pdf

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

**WELL COMPLETION OR RECOMPLETION REPORT AND LOG**

1a. Type of Well <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Dry <input type="checkbox"/> Other b. Type of Completion <input type="checkbox"/> New Well <input type="checkbox"/> Work Over <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Diff. Zones <input type="checkbox"/> Hydraulic Fracturing Other: _____				5. Lease Serial No.	
2. Name of Operator				6. If Indian, Allottee or Tribe Name	
3. Address				3a. Phone No. (Include area code)	
4. Location of Well (Report location clearly and in accordance with Federal requirements)* At surface  At top prod. interval reported below  At total depth				7. Unit or CA Agreement Name and No.	
14. Date Spudded				15. Date T.D. Reached	
16. Date Completed <input type="checkbox"/> D & A <input type="checkbox"/> Ready to Prod.				8. Well Name and Well No.	
18. Total Depth: MD TVD				19. Plug Back T.D.: MD TVD	
20. Depth Bridge Plug Set: MD TVD				9. API Well No.	
21. Type Electric & Other Mechanical Logs Run (Submit copy of each)				22. Was well cored? <input type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Was DST run? <input type="checkbox"/> No <input type="checkbox"/> Yes (Submit report) Directional Survey? <input type="checkbox"/> No <input type="checkbox"/> Yes (Submit copy)	
10. Field and Pool or Exploratory					
11. Sec., T., R., M., on Block and Survey or Area					
12. County or Parish				13. State	
17. Elevations (DF, RKB, RT, GL)*					

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 Sks. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled

24. Tubing Record									
Size	Dept Set (MD)	Packer Dept (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)							
B)							
C)							
D)							

27. Acid, Fracture, Treatment, Cement Squeeze, Post hydraulic fracturing chemical disclosures on FracFocus.org when required by state or federal regulation									
Depth Interval	Amount, Type of Material and Date of Chemical Disclosure upload on FracFocus.org as applicable								

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
			➡						
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	
			➡						

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	
			➡						

\*(See instructions and spaces for additional data on page 2)



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 (Solid, used for fuel, vented, etc.)

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

32. Additional remarks (include plugging procedure).

APPROVED

By Allison Morency at 9:13 am, Jul 03, 2025

33. Indicate which items have been attached by placing a check in the appropriate boxes:

- ☐ Electrical/Mechanical Logs (1 full set req'd.)
- ☐ Geologic Report
- ☐ DST Report
- ☐ Directional Survey
- ☐ Sundry Notice for plugging and cement verification
- ☐ Core Analysis
- ☐ Other:

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

Name (please print)

Title

Signature

Date

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

**GENERAL:** This form is designed for submitting a complete and correct well completion/recompletion report and log on all types of wells on Federal and Indian leases to a Federal agency, pursuant to applicable Federal laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal office. If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, and all types electric), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal laws and regulations. All attachments should be listed on this form, see item 33.

**ITEM 4:** Locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local Federal office for specific instructions.

**ITEM 17:** Indicate which reported elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

**ITEM 23:** Show how reported top(s) of cement were determined, i.e. circulated (CIR), or calculated (CAL), or cement bond log (CBL), or temperature survey (TS).

## NOTICES

The Privacy Act of 1974 and the regulation in 43 CFR 2.48 (d) provide that you be furnished the following information in connection with information required by this application.

**AUTHORITY:** 30 U.S.C. 181 et seq., 351 et seq., 25 U.S.C. et seq.; 43 CFR 3160.

**PRINCIPAL PURPOSE:** The information is to be used to evaluate the actual operations performed in the drilling, completing and testing of a well on a Federal or Indian lease.

**ROUTINE USES:** (1) Evaluate the equipment and procedures used during the drilling and completing/recompleting of a well. (2) The review of geologic zones and formation encountered during drilling. (3) Analyze future applications to drill in light of data obtained and methods used. (4)(5) Information from the record and/or the record will be transferred to appropriate Federal, State, local or foreign agencies, when relevant to civil, criminal or regulatory investigations or prosecutions.

**EFFECT OF NOT PROVIDING INFORMATION:** Filing of this report and disclosure of the information is mandatory once a well drilled on a Federal or Indian lease is completed/recompleted.

The Paperwork Reduction Act of 1995 requires us to inform you that:

The BLM collects this information to allow evaluation of the technical, safety, and environmental factors involved with drilling and completing/recompleting wells on Federal and Indian oil and gas leases.

This information will be used to analyze operations and to compare equipment and procedures actually used with those proposed and approved.

Response to this request is mandatory only if the operator elects to initiate drilling and completing/recompleting operations on an oil and gas lease.

The BLM would like you to know that you do not have to respond to this or any other Federal agency-sponsored information collection unless it displays a currently valid OMB control number.

**BURDEN HOURS STATEMENT:** Public reporting burden for this form is estimated to average 8 hours per response, including the time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding the burden estimate or any other aspect of this form to U.S. Department of the Interior, Bureau of Land Management (1004-0137), Bureau Information Collection Clearance Officer (WO-630), 1849 C Street, N.W., Mail Stop 401 LS, Washington, D.C. 20240.

## Additional Information

Location information: 00S1

SHL: SWSE / 979 FSL / 1405 FEL / TWSP: 22S / RNG: 32E / SEC: 17 / LAT: 32.38706 / LONG: -103.692777

KOP: SWSE / 152 FSL / 1654 FEL / TWSP: 22S / RNG: 32E / SEC: 17 / LAT: 32.384784 / LONG: -103.693579

PPP: SWSE / 356 FSL / 1726 FEL / TWSP: 22S / RNG: 32E / SEC: 8 / LAT: 32.385344 / LONG: -103.693816

EXIT: NWNE / 200 FNL / 1960 FEL / TWSP: 22S / RNG: 32E / SEC: 8 / LAT: 32.412849 / LONG: -103.694611

BHL: NWNE / 76 FNL / 1973 FEL / TWSP: 22S / RNG: 32E / SEC: 8 / LAT: 32.413187 / LONG: -103.694654

## Additional Cement Segments for Casings: 00S1

Hole Size: 9.875, Size/Grade: 7.625 / HCL-80, Wt. (#ft): 26.4, Top (MD): 0, Bottom (MD): 9400

Cementing/Segment - Stage Cementer Depth: null, No of Sks: 743.0, Type of Cement: CI H, Slurry  
Vol BBL: 1817.3, Cement Lead Top: 0.0, Amount Pulled: null ; Cement Tail Type: CI H, Cement Tail  
Qty (sks): 384.0, Cement Tail Yield (cu.ft/sks): 1.35, Cement Tail Top (MD): 0.0

Cementing/Segment - Stage Cementer Depth: null, No of Sks: 1098.0, Type of Cement: CI C, Slurry  
Vol BBL: 1817.3, Cement Lead Top: 0.0, Amount Pulled: null ; Cement Tail Type: CI C, Cement Tail  
Qty (sks): 312.0, Cement Tail Yield (cu.ft/sks): 1.91, Cement Tail Top (MD): 0.0

Hole Size: 6.75, Size/Grade: 5.5 / P-110, Wt. (#ft): 20, Top (MD): 0, Bottom (MD): 20240

Cementing/Segment - Stage Cementer Depth: null, No of Sks: 75.0, Type of Cement: CI C, Slurry Vol  
BBL: 232.3, Cement Lead Top: 0.0, Amount Pulled: null ; Cement Tail Type: CI C, Cement Tail Qty  
(sks): 587.0, Cement Tail Yield (cu.ft/sks): 1.84, Cement Tail Top (MD): 8392.0

## Summary of Porous Zones Information:

Formation: BRUSHY CANYON, Descriptions, Contents, etc: , Bottom: 6980

Formation: BONE SPRING, Descriptions, Contents, etc: , Bottom: 8674

Formation: BONE SPRING 1ST, Descriptions, Contents, etc: , Bottom: 9702

Attachments: 00S1

## Log Attachments:

1) DrPiUnit173H\_WBD\_20241024134303.pdf

2) DrPiUnit173H\_AsDrilledC102\_20241024134228.pdf

Sante Fe Main Office  
Phone: (505) 476-3441

General Information  
Phone: (505) 629-6116

Online Phone Directory  
<https://www.emnrd.nm.gov/ocd/contact-us>

State of New Mexico  
Energy, Minerals and Natural Resources  
Oil Conservation Division  
1220 S. St Francis Dr.  
Santa Fe, NM 87505

ACKNOWLEDGMENTS

Action 482577

ACKNOWLEDGMENTS

Operator: OXY USA INC P.O. Box 4294 Houston, TX 772104294	OGRID: 16696
	Action Number: 482577
	Action Type: [C-105] Well (Re)Completion (C-105)

ACKNOWLEDGMENTS

<input checked="" type="checkbox"/>	I hereby certify that the required Water Use Report has been, or will be, submitted for this wells completion.
<input checked="" type="checkbox"/>	I hereby certify that the required FracFocus disclosure has been, or will be, submitted for this wells completion.
<input checked="" type="checkbox"/>	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.

Sante Fe Main Office  
Phone: (505) 476-3441

General Information  
Phone: (505) 629-6116

Online Phone Directory  
<https://www.emnrd.nm.gov/ocd/contact-us>

State of New Mexico  
Energy, Minerals and Natural Resources  
Oil Conservation Division  
1220 S. St Francis Dr.  
Santa Fe, NM 87505

CONDITIONS

Action 482577

CONDITIONS

Operator: OXY USA INC P.O. Box 4294 Houston, TX 772104294	OGRID: 16696
	Action Number: 482577
	Action Type: [C-105] Well (Re)Completion (C-105)

CONDITIONS

Created By	Condition	Condition Date
plmartinez	None	8/12/2025