Form 3160-5 (June 2015) B	UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT NDRY NOTICES AND REPORTS ON WELLS use this form for proposals to drill or to re-enter an					FORM APPROVED OMB NO. 1004-0137 Expires: January 31, 2018	
SUNDRY NOTICES AND REPORTS ON WELLS					 Lease Serial No. NMNM66925 		
Do not use th abandoned we	is form for proposals to II. Use form 3160-3 (API	D) for such p	enter an y	<u>ر ال</u> ه	6. If Indian, Allottee of	or Tribe Name	
SUBMIT IN TRIPLICATE - Other instructions on page					7. If Unit or CA/Agre NMNM137099)	ement, Name and/or No.	
1. Type of Well					8. Well Name and No. MESA VERDE W		
2. Name of Operator Contact: SARAH E CHAPMAN OXY USA INCORPORATED E-Mail: SARAH_CHAPMAN@OXY.COM					9. API Well No. 30-025-45921-00-X1		
3a. Address 3b. Phone No. (include area code) P O BOX 4294 Ph; 713-350-4997					10. Field and Pool or MESA VERDE	Exploratory Area	
HOUSTON, TX 77210-4294							
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)				11. County or Parish, State			
Sec 17 T24S R32E SESW 28 32.210968 N Lat, 103.700806		LEA COUNTY, NM			NM		
12. CHECK THE AI	PPROPRIATE BOX(ES)	TO INDICA	TE NATURE O	F NOTICE,	REPORT, OR OTI	HER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION						
□ Notice of Intent	Acidize	🗖 Dee	pen	Product	ion (Start/Resume)	Water Shut-Off	
_	Alter Casing	🖸 Hyd	raulic Fracturing	🗋 Reclam	ation	Well Integrity	
Subsequent Report	Casing Repair	-	Construction	🗖 Recom		Other Drilling Operations	
Final Abandonment Notice	Change Plans		and Abandon	- ·	arily Abandon	Drining Operations	
	Convert to Injection	🗖 Plug	; Back	Water I	Disposal		
Attach the Bond under which the wor following completion of the involved testing has been completed. Final Al determined that the site is ready for f 7/17/19 MIRU, test BOP to 50 good test. RIH & drill new form Drill 6-3/4" hole to 12016'V/22 spacer then cmt w/ 780sxs (2r job, TOC @ 10940'. 7/27/19 N	l operations. If the operation re- bandonment Notices must be fil- inal inspection. 100# high 250# low, good nation to 11486', perform 1327'M. RIH & set 5-1/2" 2 00bbl) class H w/ additive	sults in a multipl ed only after all test. Test 7-5 FIT test to El 0# P-110 DC s 13.2ppg 1.4	e completion or reco requirements, includ /8" csg to 2100# /W=11.0ppg 230 X/TORQ DQW (44 yield. Full retu	for 30 minu bing reclamatio for 30 minu 00#, good te 22327', p	new interval, a Form 316 n, have been completed a tes, st. ump 180bbl	60-4 must be filed once	
14. I hereby certify that the foregoing is	#Electronic Submission For OXY US	475994 verifie A INCORPOR	d by the BLM Wel ATED, sent to th	l Information	n System		
Con Name (Printed/Typed) SARAH E	ssing by PRISCILLA PEREZ on 07/31/2019 (1 Title REGULATORY SPEC			•			
						· · · · · · · · · · · · · · · · · · ·	
Signature (Electronic		Date 07/31/2019					
	THIS SPACE FO	DR FEDERA		OFFICE U	SE		
Approved By ACCEPT		JONATHO TitlePETROEL	N SHEPAR UM ENGIN		Date 08/06/2019		
Conditions of approval, if any, are attache certify that the applicant holds legal or equivalent which would entitle the applicant to condu-							
Title 18 U.S.C. Section 1001 and Title 43 States any false, fictitious or fraudulent				willfully to m	ake to any department of	r agency of the United	
(Instructions on page 2) ** BI M REV	ISED ** BI M REVISEI) ** BI M PI	VISED ** RI M				

Revisions to Operator-Submitted EC Data for Sundry Notice #475994

	Operator Submitted	BLM Revised (AFMSS)
Sundry Type:	DRG SR	DRG SR
Lease:	NMNM66925	NMNM66925
Agreement:		NMNM137099X (NMNM137099X)
Operator:	OXY USA INC. P.O. BOX 4294 HOUSTON, TX 77210 Ph: 713-350-4997	OXY USA INCORPORATED P O BOX 4294 HOUSTON, TX 77210-4294 Ph: 713.366.5303
Admin Contact:	SARAH E CHAPMAN REGULATORY SPECIALIST E-Mail: SARAH CHAPMAN@OXY.COM Cell: 281-642-5503 Ph: 713-350-4997	SARAH E CHAPMAN REGULATORY SPECIALIST E-Mail: SARAH_CHAPMAN@OXY.COM Cell: 281-642-5503 Ph: 713-350-4997
Tech Contact:	SARAH E CHAPMAN REGULATORY SPECIALIST E-Mail: SARAH CHAPMAN@OXY.COM Cell: 281-642-5503 Ph: 713-350-4997	SARAH E CHAPMAN REGULATORY SPECIALIST E-Mail: SARAH_CHAPMAN@OXY.COM Cell: 281-642-5503 Ph: 713-350-4997
Location: State: County:	NM LEA	NM LEA
Field/Pool:	MESA VERDE WOLFCAMP	MESAVERDE
Well/Facility:	MESA VERDE WC UNIT 8H Sec 17 T24S R32E SESW 280FSL 1386FWL 32.210968 N Lat, 103.700806 W Lon	MESA VERDE WC UNIT 8H Sec 17 T24S R32E SESW 280FSL 1386FWL 32.210968 N Lat, 103.700806 W Lon