

Form 3160-4
(August 2007)UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB No. 1004-0137
Expires: July 31, 2010

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

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. NMNM66925	
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 INCORPORATED				7. Unit or CA Agreement Name and No. NMNM137099X	
Contact: LESLIE REEVES E-Mail: LESLIE_REEVES@OXY.COM				8. Lease Name and Well No. MESA VERDE WC UNIT 5H	
3. Address P O BOX 4294 HOUSTON, TX 77210-4294			3a. Phone No. (include area code) Ph: 713-497-2492		9. API Well No. 30-025-45862-00-X1
4. Location of Well (Report location clearly and in accordance with Federal requirements)* At surface Sec 17 T24S R32E Mer NMP SESW 280FSL 2436FWL 32.210984 N Lat, 103.697413 W Lon At top prod interval reported below Sec 17 T24S R32E Mer NMP SWSE 383FSL 2170FEL 32.211260 N Lat, 103.695230 W Lon At total depth Sec 8 T24S R32E Mer NMP NWNE 22FNL 2223FEL 32.239208 N Lat, 103.695317 W Lon				10. Field and Pool, or Exploratory MESA VERDE; WOLFCAMP	
14. Date Spudded 05/18/2019				15. Date T.D. Reached 07/23/2019	
16. Date Completed <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod. 09/19/2019				17. Elevations (DF, KB, RT, GL)* 3560 GL	
18. Total Depth: MD 22479 TVD 12211		19. Plug Back T.D.: MD 22468 TVD 12211		20. Depth Bridge Plug Set: MD TVD	
21. Type Electric & Other Mechanical Logs Run (Submit copy of each) GR				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 J-55	45.5	0	942		908	220	0	
9.875	7.625 HCL-80	26.4	0	11567		3988	1246	0	
6.750	5.500 P-110	20.0	0	22445		840	205	11050	

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) WOLFCAMP	12327	22387	12327 TO 22387	0.000	1512	ACTIVE
B)						
C)						
D)						

26. Perforation Record

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

Depth Interval	Amount and Type of Material
12327 TO 22387	14070882G SLICKWATER & 21182096LBS 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
09/19/2019	10/02/2019	24	→	3969.0	9870.0	5325.0			FLows FROM WELL
Choke Size	Tbg. Press. Flwg.	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
38/128	SI	1978.0	→	3969	9870	5325	1062	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.	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 #497007 VERIFIED BY THE BLM WELL INFORMATION SYSTEM

** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED **

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.*)
CAPTURED

30. Summary of Porous Zones (Include Aquifers):	31. Formation (Log) Markers
<p>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.</p>	

Formation	Top	Bottom	Descriptions, Contents, etc.	Name	Top Meas. Depth
CHERRY CANYON	5572	6842		RUSTLER	860
BRUSHY CANYON	6843	8565		SALADO	1146
BONE SPRING	8566	9502		CASTILE	3232
BONE SPRING 1ST	9503	9924		DELAWARE	4669
BONE SPRING 2ND	9925	10836		CHERRY CANYON	5572
BONE SPRING 3RD	10837	12130		BRUSHY CANYON	6843
WOLFCAMP	12131	12224		BONE SPRING	8566
				BONE SPRING 1ST	9503

32. Additional remarks (include plugging procedure):
Log Header, directional survey, WBD attached.

Tubing exception sundry submitted separately. (ES#496707)

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 #497007 Verified by the BLM Well Information System.
For OXY USA INCORPORATED, sent to the Hobbs
Committed to AFMSS for processing by CHRISTOPHER WALLS on 04/10/2020 (20CRW0036SE)

Name(*please print*) LESLIE REEVES Title REGULATORY ADVISOR

Signature _____ (Electronic Submission) Date 12/26/2019

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.

Revisions to Operator-Submitted EC Data for Well Completion #497007

	Operator Submitted	BLM Revised (AFMSS)
Lease:	NMNM66925	NMNM66925
Agreement:		NMNM137099X (NMNM137099X)
Operator:	OXY USA INC PO BOX 4294 HOUSTON, TX 77210 Ph: 713-497-2492	OXY USA INCORPORATED P O BOX 4294 HOUSTON, TX 77210-4294 Ph: 713.366.5303
Admin Contact:	LESLIE REEVES REGULATORY ADVISOR E-Mail: LESLIE_REEVES@OXY.COM Ph: 713-497-2492	LESLIE REEVES REGULATORY ADVISOR E-Mail: LESLIE_REEVES@OXY.COM Cell: 281-733-0824 Ph: 713-497-2492
Tech Contact:	LESLIE REEVES REGULATORY ADVISOR E-Mail: LESLIE_REEVES@OXY.COM Ph: 713-497-2492	LESLIE REEVES REGULATORY ADVISOR E-Mail: LESLIE_REEVES@OXY.COM Cell: 281-733-0824 Ph: 713-497-2492
Well Name: Number:	MESA VERDE WC UNIT 5H	MESA VERDE WC UNIT 5H
Location: State: County: S/T/R: Surf Loc:	NM LEA Sec 17 T24S R32E Mer SESW 280FSL 2436FWL 32.210984 N Lat, 103.697413 W Lon	NM LEA Sec 17 T24S R32E Mer NMP SESW 280FSL 2436FWL 32.210984 N Lat, 103.697413 W Lon
Field/Pool:	MESA VERDE WOLFCAMP	MESA VERDE
Logs Run:	GR	GR
Producing Intervals - Formations:	WOLFCAMP	WOLFCAMP
Porous Zones:	CHERRY CANYON BRUSHY CANYON BONE SPRING BONE SPRING 1ST BONE SPRING 2ND BONE SPRING 3RD WOLFCAMP	CHERRY CANYON BRUSHY CANYON BONE SPRING BONE SPRING 1ST BONE SPRING 2ND BONE SPRING 3RD WOLFCAMP
Markers:	RUSTLER SALADO CASTILE DELAWARE CHERRY CANYON BRUSHY CANYON BONE SPRING BONE SPRING 1ST	RUSTLER SALADO CASTILE DELAWARE CHERRY CANYON BRUSHY CANYON BONE SPRING BONE SPRING 1ST