Form 3160-4 (August 2007)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

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

WELL COMPLETION OR RECOMPLETION REPORT AND LO	G
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WELL COMPLETION OR RECOMPLETION REPORT AND LOG											ease Serial I					
1a. Type of Well ☐ Gas Well ☐ Dry ☐ Other									6. If Indian, Allottee or Tribe Name							
b. Type of Completion New Well Work Over Deepen Plug Back Diff. Resvr. Other									Resvr.	7. Unit or CA Agreement Name and No. NMNM137099X						
Name of Operator Contact: LESLIE REEVES OXY USA INCORPORATED E-Mail: LESLIE_REEVES@OXY.COM												Lease Name and Well No. MESA VERDE WC UNIT 6H				
3. Address P O BOX 4294 HOUSTON, TX 77210-4294 3a. Phone No. (include area code) Ph: 713-497-2492 9. API Well No. 30-025-45863-00-X													25-45863-00-X1			
4. Location of Well (Report location clearly and in accordance with Federal requirements)* Sec 17 T24S R32E Mer NMP 10. Field and Pool, or Exploratory MESA VERDE; WOLFCAMP																
At surface SESW 280FSL 2401FWL 32.210983 N Lat, 103.697526 W Lon Sec 17 T24S R32E Mer NMP												11. S	11. Sec., T., R., M., or Block and Survey or Area Sec 17 T24S R32E Mer NMP			
At top prod interval reported below SWSE 353FSL 2206FWL 32.211190 N Lat, 103.698160 W Lon Sec 8 T24S R32E Mer NMP											12. County or Parish 13. State			13. State		
At total depth NENW 37FNL 2150FWL 32.239195 N Lat, 103.698186 W Lon LEA NM 14. Date Spudded 15. Date T.D. Reached 16. Date Completed 17. Elevations (DF, KB, RT, GL)*																
14. Date Spudded 05/16/2019											5, K1, GL)					
18. Total D	epth:	MD TVD	22314 12067		19.	k T.D.:	T.D.: MD 22303 20. D				20. Dej	epth Bridge Plug Set: MD TVD				
21. Type E GR	lectric & Oth	er Mecha	nical Logs R	un (Sub	mit co	opy of eac	ch)				Was	well core DST run? ctional Su		⊠ No	☐ Yes	(Submit analysis) (Submit analysis) (Submit analysis)
23. Casing ar	nd Liner Reco	ord (Repo	ort all strings	set in v	vell)							_				
Hole Size	Size/G	rade	Wt. (#/ft.)	To (M	*	Bottor (MD)	"	Cemer Depth	nter		f Sks. & f Cement	Slurry (BB		Cement 7	Гор*	Amount Pulled
14.750		750 J-55	45.5	C			942				90			1		
9.875 7.625 HCL-80 6.750 5.500 P-110			26.4 20.0		0					1655 887			515 217		0 10775	
0.700	0.00	0														
							_					1				
24. Tubing	Record			<u> </u>												
	Depth Set (M	ID) P	acker Depth	(MD)	Siz	ze D	epth Set (MD)	P	acker Dep	oth (MD)	MD) Size Depth Set (MD) Packer I			Packer Depth (MD)	
						\Box										
25. Produci				ı			26. Perfor						.		I	
A)	ormation WOLFC	·ΔMP		Top I		22218		Perforated Interval			22218	Size		No. Holes 1512 ACTI		Perf. Status
B)	WOLFC	AIVIE		12137		22210		12157 TO 222		22210	0.0	00	1312	ACTI	V L	
C)																
D)																
	racture, Treat		nent Squeeze	e, Etc.					_	1	TD C1	<i>T</i> . 1 1				
	Depth Interva 1232	7 TO 22:	387 147326	76G SLI	CKWA	ATER & 2	1205960LI	BS SAN		nount and	Type of I	viateriai				
29 Product	ion - Interval	Λ														
Date First	Test	Hours	Test	Oil	To	Gas	Water	О	il Gra	avity	Gas		Producti	on Method		
Produced	duced Date Tested F		Production	BBL		MCF 10092.0	BBL 7151	BBL Corr.						FLOWS FROM WELL		
		24 Hr.	• 4755.0 Oil		Gas	Water	7151.0 Gas:O		l Well St		Status					
		Rate			MCF 10092	BBL 715	Ratio		2122 F		POW	OW				
	tion - Interva	l			<u>- 1</u>	.0002	1									
Date First	Test Date	Hours	Test	Oil		Gas MCF	Water BBL		il Gra		Gas		Producti	on Method		
Produced	Date	Tested	Production	BBL	ľ	MCI,	DDL		orr. A	n:1	Gravi	y				
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL		Gas MCF	Water BBL		ias:Oi atio	il	Well	Status				
	151	I		ı	- 1		1	- 1			1					

201 D 1	· · · · · ·	1.0												
Date First	Test	Hours	Test	Oil	Gas	Water	Oil Gravity	Gas		Production Method				
Produced	Date	Tested	Production	BBL	MCF	BBL	Corr. API	Grav		Production viction				
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Wel	l Status					
28c. Produ	uction - Interv	al D												
Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gra		Production Method				
Choke Size	e Tbg. Press. Csg. 24 Hr. Flwg. Press. Rate				Gas MCF	Water BBL	Gas:Oil Ratio	Wel	l Status					
29. Dispos	sition of Gas(S TURED	Sold, used	for fuel, vent	ed, etc.)			L							
	nary of Porous	Zones (In	clude Aquife	rs):					31. For	mation (Log) Markers				
tests, i	all important z including deptl coveries.							ures						
	Formation		Тор	Bottom		ns, Contents,	etc.		Name	Top Meas. Depth				
BONE SP BONE SP WOLFCAI	CANYON RING RING 1ST RING 2ND RING 3RD	iinaluda n	5571 6835 8558 9480 9914 10867 12185	6834 8857 9479 9913 10866 12184 12229					RU SA CA DE CH BR BO BO	868 1163 3221 4668 5571 6835 8558 9480				
Log H	deader, direct	ional sur	vey, WBD a	ttached.	S#496707)									
1. Ele 5. Sur	enclosed attacectrical/Mechandry Notice for	nical Logs r plugging	g and cement	verification	(2. Geologic 5. Core Ana	lysis	7	B. DST Rep		onal Survey			
		Con	Electr mmitted to A	onic Submi For (ssion #497(OXY USA 1)86 Verified INCORPOI	by the BLM RATED, sen OPHER WA	Well Infort t to the Hob LLS on 04/	mation Sys obs 10/2020 (2	0CRW0037SE)	ions):			
Name	(please print)	LESLIÉ	KEEVES				Title	REGULA	IORY AD	VISOR				
Signat	Signature (Electronic Submission)								Date <u>12/27/2019</u>					
Title 19 II	I.S.C. Saction	1001 and	Title 12 II S	Section 1	212 make it	a crime for	any parcon k	nowingly an	d willfully	to make to any department or	agancy			

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 fradulent statements or representations as to any matter within its jurisdiction.

Revisions to Operator-Submitted EC Data for Well Completion #497086

Operator Submitted

BLM Revised (AFMSS)

NMNM137099X (NMNM137099X)

OXY USA INCORPORATED

Lease:

NMNM66925

NMNM66925

Agreement:

Operator:

OXY USA INC PO BOX 4294

HOUSTON, TX 77210

Ph: 713-497-2492

HOUSTON, TX 77210-4294

P O BOX 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

Cell: 281-733-0824 Ph: 713-497-2492

Ph: 713-497-2492

Well Name: MESA VERDE WC UNIT

Number:

MESA VERDE WC UNIT

NM

GR

Location:

NM State: County:

LEA

Sec 17 T24S R32E Mer

LEA Sec 17 T24S R32E Mer NMP

S/T/R: Surf Loc:

LESLIE REEVES REGULATORY ADVISOR E-Mail: LESLIE_REEVES@OXY.COM

SESW 280FSL 2401FWL 32.210983 N Lat, 103.697526 SESW 280FSL 2401FWL 32.210983 N Lat, 103.697526 W Lon

Field/Pool:

MESA VERDE WOLFCAMP

MESA VERDE

Logs Run: 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

RUSTLER Markers:

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