

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 7H	
3. Address P O BOX 4294 HOUSTON, TX 77210-4294			3a. Phone No. (include area code) Ph: 713-497-2492		9. API Well No. 30-025-45920-00-X1
4. Location of Well (Report location clearly and in accordance with Federal requirements)* Sec 17 T24S R32E Mer NMP At surface SESW 280FSL 1421FWL 32.210966 N Lat, 103.700695 W Lon Sec 17 T24S R32E Mer NMP At top prod interval reported below SWSW 201FSL 1267FWL 32.210750 N Lat, 103.701200 W Lon Sec 8 T24S R32E Mer NMP At total depth NWNW 22FNL 1191FWL 32.239180 N Lat, 103.701226 W Lon				10. Field and Pool, or Exploratory MESA VERDE; WOLFCAMP	
14. Date Spudded 05/25/2019				15. Date T.D. Reached 07/15/2019	
16. Date Completed <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod. 09/13/2019				17. Elevations (DF, KB, RT, GL)* 3563 GL	
18. Total Depth: MD TVD		22458 12211		19. Plug Back T.D.: MD TVD	
		22433 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	934		970	235	0	
9.875	7.625 HCL-80	26.4	0	11461		1530	517	0	
6.750	5.500 P-110	20.0	0	22433		805	206	10960	

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) WOLFCAMP	12047	22108	12047 TO 22108	0.000	1512	ACTIVE
B)						
C)						
D)						

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

Depth Interval	Amount and Type of Material
12047 TO 22108	12537690G SLICKWATER & 21217268LBS 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
09/14/2019	10/02/2019	24	→	4579.0	9177.0	4833.0			FLows FROM WELL
Choke Size	Tbg. Press. Flwg.	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
36/128	SI	1975.0	→	4579	9177	4833	2004	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 #497087 VERIFIED BY THE BLM WELL INFORMATION SYSTEM

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

PM

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): 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
CHERRY CANYON	5572	6859		RUSTLER	787
BRUSHY CANYON	6860	8534		SALADO	1139
BONE SPRING	8535	9487		CASTILE	3197
BONE SPRING 1ST	9488	9902		DELAWARE	4664
BONE SPRING 2ND	9903	10786		CHERRY CANYON	5572
BONE SPRING 3RD	10787	12050		BRUSHY CANYON	6860
WOLFCAMP	12051	12213		BONE SPRING	8535
				BONE SPRING 1ST	9488

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 #497087 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 (20CRW0038SE)

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

Signature _____ (Electronic Submission) Date 12/27/2019

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 #497087

	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 7H	MESA VERDE WC UNIT 7H
Location: State: County: S/T/R: Surf Loc:	NM LEA Sec 17 T24S R32E Mer SESW 280FSL 1421FWL 32.210966 N Lat, 103.700695 W Lon	NM LEA Sec 17 T24S R32E Mer NMP SESW 280FSL 1421FWL 32.210966 N Lat, 103.700695 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