

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
OMB NO. 1004-0135  
Expires: July 31, 2010

**SUNDRY NOTICES AND REPORTS ON WELLS**  
*Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.*

5. Lease Serial No.  
NMNM69377

6. If Indian, Allottee or Tribe Name

**SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

7. If Unit or CA/Agreement, Name and/or No.

1. Type of Well  
☒ Oil Well ☐ Gas Well ☐ Other

8. Well Name and No.  
RED TANK 28 FEDERAL 5H

2. Name of Operator  
OXY USA INC  
Contact: JENNIFER A DUARTE  
E-Mail: JENNIFER\_DUARTE@OXY.COM

9. API Well No.  
~~30-025-41189~~ 30-025-37595

3a. Address  
PO BOX 4294  
HOUSTON, TX 77210

3b. Phone No. (include area code)  
Ph: 713-513-6640

10. Field and Pool, or Exploratory  
RED TANK BONE SPRING

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
Sec 28 T22S R32E NENE 295FNL 880FEL

11. County or Parish, and State  
LEA COUNTY, NM

**12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.)

OXY USA INC respectfully requests an additional 30' to the east of the pad to accommodate the rig. The original pad was for a smaller rig. The proper adjustment to reclamation will be done for the additional disturbance once the well has been completed.

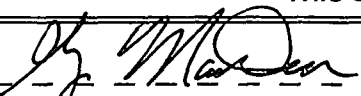
JUL 05 2013

Original Conditions of Approval Apply

RECEIVED

14. I hereby certify that the foregoing is true and correct.	
Electronic Submission #211008 verified by the BLM Well Information System For OXY USA INC, sent to the Hobbs Committed to AFMSS for processing by KURT SIMMONS on 06/20/2013 ( )	
Name (Printed/Typed) JENNIFER A DUARTE	Title REGULATORY SPECIALIST
Signature (Electronic Submission)	Date 06/18/2013

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved By 	FIELD MANAGER	Date 7/2/13
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.		CARLSBAD FIELD OFFICE

Title 18 U.S.C. Section 1001 and Title 45 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.

**\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\***

JUL 09 2013