

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

**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.*

**HOBBS OCD**  
**JAN 29 2018**  
**RECEIVED**

FORM APPROVED  
OMB NO. 1004-0137  
Expires: January 31, 2018

5. Lease Serial No.  
NMNM27725

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.  
M.K. STEWART 10 /

9. API Well No.  
30-025-33963

10. Field and Pool or Exploratory Area  
TEAGUE PADDOCK BLINEBRY

11. County or Parish, State  
LEA COUNTY, NM

**SUBMIT IN TRIPLICATE - Other instructions on page 2**

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

2. Name of Operator  
OXY USA INC. Contact: DAVID STEWART  
E-Mail: david\_stewart@oxy.com

3a. Address  
P.O. BOX 50250  
MIDLAND, TX 79710  
3b. Phone No. (include area code)  
Ph: 432-685-5717  
Fx: 432-685-5742

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
Sec 28 T23S R37E SWSE 330FSL 1340FEL  
32.268982 N Lat, 103.163643 W Lon

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

TYPE OF SUBMISSION	TYPE OF ACTION			
<input 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 checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Hydraulic Fracturing	<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 type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input checked="" 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 must 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 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

1/11/2018 MIRU PU, ND FL, dig out cellar to surface head, unhang well from PU, test tbq to 500#, held OK, unseat pump, POOH & LD rods & pump. ND B-1 adapter & WH, NU BOP.

1/15/2018 POOH w/ tbq, RIH & set CIBP @ 5390', PUH.

1/16/2018 RIH & tag CIBP @ 5390', circ hole w/ 10# MLF, M&P 25sx CL C cmt, Calc TOC-5138'. PUH to 4989', M&P 25sx CL C cmt, Calc TOC-4737'. PUH to 3942', M&P 25sx CL C cmt, Calc TOC-3690'. PUH to 2648', M&P 25sx CL C cmt, PUH, WOC.

1/17/2018 RIH & tag cmt @ 2417', PUH to 1201', M&P 30sx CL C cmt w/ 2% CaCl<sub>2</sub>, POOH, WOC. RIH & tag cmt @ 950'. PUH & perf @ 300', POOH. Close blinds, RU pump line to csg, EIR @ 1.5bpm, ND BOP, NU B-1 Adapter, M&P 90sx CL C cmt, circ cmt to surf, visually confirmed. RDPU.

**SUBJECT TO LIKE  
APPROVAL BY BLM**

14. I hereby certify that the foregoing is true and correct.

**Electronic Submission #401881 verified by the BLM Well Information System  
For OXY USA INC., sent to the Hobbs**

Name (Printed/Typed) DAVID STEWART

Title SR. REGULATORY ADVISOR

Signature *David Stewart* (Electronic Submission)

Date 01/22/2018

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

Approved By \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

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.

Office \_\_\_\_\_

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.

(Instructions on page 2)

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

**FOR RECORD ONLY**