

District I  
1625 N. French Dr., Hobbs, NM 88240

District II  
811 S. First St., Artesia, NM 88210

District III  
1000 Rio Brazos Rd., Aztec, NM 87410

District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals & Natural Resources

Oil Conservation Division  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-104  
Revised August 1, 2011

Submit one copy to appropriate District Office

☐ AMENDED REPORT

**I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT**

<sup>1</sup> Operator name and Address OXY USA INC. P.O. BOX 4294 HOUSTON, TX 77210		<sup>2</sup> OGRID Number 16696
<sup>4</sup> API Number 30-025-44185		<sup>3</sup> Reason for Filing Code/ Effective Date - NW
<sup>5</sup> Pool Name MESA VERDE; BONE SPRING		<sup>6</sup> Pool Code 96229
<sup>7</sup> Property Code: 320828	<sup>8</sup> Property Name: MESA VERDE BONE SPRING UNIT	
		<sup>9</sup> Well Number: 5H

**II. <sup>10</sup> Surface Location**

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County
P	17	24S	32E		280	SOUTH	995	EAST	LEA

**<sup>11</sup> Bottom Hole Location** FTP- 337' FSL 1252' FEL LTP- 358' FNL 1329' FEL (B)

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
B	8	24S	32E		196	NORTH	1329	EAST	LEA
<sup>12</sup> Lse Code F	<sup>13</sup> Producing Method Code : F		<sup>14</sup> Gas Connection Date: 5/16/18		<sup>15</sup> C-129 Permit Number		<sup>16</sup> C-129 Effective Date		<sup>17</sup> C-129 Expiration Date

**III. Oil and Gas Transporters**

<sup>18</sup> Transporter OGRID	<sup>19</sup> Transporter Name and Address	<sup>20</sup> O/G/W
	GREAT LAKES PETROLEUM TRANSPORTATION, LLC	O
151618	ENTERPRISE FIELD SERVICES LLC	G
	HOBBS OGD	
	AUG 09 2018	
	RECEIVED	

**IV. Well Completion Data**

<sup>21</sup> Spud Date 1/29/18	<sup>22</sup> Ready Date 5/11/18	<sup>23</sup> TD 10449'V/20505'M	<sup>24</sup> PBT 10449'V/20441'M	<sup>25</sup> Perforations 10441'-20343'	<sup>26</sup> DHC, MC
<sup>27</sup> Hole Size		<sup>28</sup> Casing & Tubing Size	<sup>29</sup> Depth Set		<sup>30</sup> Sacks Cement
17-1/2"		13-3/8"	974'		1245
12-1/4"		9-5/8"	4694'		1290
8-1/2"		5-1/2"	20490'		2895

**V. Well Test Data**

<sup>31</sup> Date New Oil 5/15/18	<sup>32</sup> Gas Delivery Date 5/16/18	<sup>33</sup> Test Date 6/4/18	<sup>34</sup> Test Length 24 HOUR	<sup>35</sup> Tbg. Pressure	<sup>36</sup> Csg. Pressure 924
<sup>37</sup> Choke Size 128/128	<sup>38</sup> Oil 1611	<sup>39</sup> Water 4796	<sup>40</sup> Gas 2528		<sup>41</sup> Test Method FLOWING

<sup>42</sup> I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature: Sarah Chapman

Printed name:  
SARAH CHAPMAN

Title:  
REGULATORY SPECIALIST

E-mail Address:  
sarah\_chapman@oxy.com

Date:  
08/06/18

Phone:  
713-350-4997

OIL CONSERVATION DIVISION

Approved by: Karen Sharp

Title: Staff Mgr

Approval Date: 8-9-18

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTFORM APPROVED  
OMB NO 1004-0137  
Expires January 31, 2018**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  
NMNM66925

6. If Indian, Allottee or Tribe Name

**SUBMIT IN TRIPLICATE - Other instructions on page 2**7. If Unit or CA/Agreement, Name and/or No  
NMNM137098X

## 1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other8. Well Name and No  
MESA VERDE BS UNIT 5H2. Name of Operator  
OXY USA INC.Contact: JANA MENDIOLA  
E-Mail: janalyn\_mendiola@oxy.com9. API Well No.  
30-025-441853a. Address  
P.O. BOX 50250  
MIDLAND, TX 797103b. Phone No (include area code)  
Ph: 432-685-593610. Field and Pool or Exploratory Area  
MESA VERDE BONE SPRING

## 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Sec 17 T24S R32E Mer NMP SESE 280FSL 995FEL  
32.211014 N Lat, 103.691406 W Lon

## 11. County or Parish, State

LEA COUNTY COUNTY, NM

**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 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 recomplete 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 recompletion 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.

RUPU 4/16/18, RIH & clean out to PBTD @ 20441'. Pressure test csg to 9800# for 30 min, good test. RIH & perf from 20343-10441' Total 1200 holes. Frac in 50 stages w/ 16225734g Slick Water + 27006g 7.5% HCl acid w/ 19618085# sand, RD Schlumberger 5/3/18. Turn well over to production for clean out, flowback and test.

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

Electronic Submission #419251 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 (Electronic Submission)

Date 05/08/2018

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

Approved By

Title

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 knowing, States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)

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

Documents pending BLM approvals will subsequently be reviewed and scanned

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTFORM APPROVED  
OMB NO. 1004-0137  
Expires: January 31, 2018**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.  
NMNM66925

6. If Indian, Allottee or Tribe Name

**SUBMIT IN TRIPLICATE - Other instructions on page 2**7. If Unit or CA/Agreement, Name and/or No.  
NMNM137096X

## 1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

## 8. Well Name and No.

MESA VERDE BS UNIT 5H

2. Name of Operator  
OXY USA INCContact: SARAH CHAPMAN  
E-Mail: SARAH\_CHAPMAN@OXY.COM

## 9. API Well No.

30-025-44185

## 3a. Address

P.O. BOX 4294  
HOUSTON, TX 77210

## 3b. Phone No. (include area code)

Ph: 713-350-4997

10. Field and Pool or Exploratory Area  
MESA VERDE BONE SPRING

## 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Sec 17 T24S R32E SESE 280FSL 995FEL  
32.211013 N Lat, 103.691307 W Lon

## 11. County or Parish, State

LEA COUNTY, NM

## 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 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 recomple 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 recomple 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.

RUPU 4/16/18, RIH & clean out to PBTD @ 20441'. Pressure test csg to 9800# for 30 min, good test. RIH & perf from 20343-20192, 20143-1993, 19944-19794, 19745-19595, 19546-19396, 19389-19239, 19148-18998, 18949-18799, 18750-18600, 18551-18401, 18352-18202, 18153-18004, 17954-17804, 17755-17605, 17556-17406, 17357-17207, 17158-17008, 16962-16809, 16760-16610, 16561-16411, 16362-16212, 16163-16011, 15964-15814, 15765-15615, 15566-15416, 15364-15218, 15168-15018, 14969-14819, 14770-14620, 14571-14421, 14372-14222, 14173-14023, 13971-13824, 13776-13625, 13576-13426, 13377-13227, 13178-13028, 12975-12829, 12780-12634, 12581-12431, 12382-12232, 12186-12033, 11984-11834, 11785-11635, 11586-11436, 11387-11235, 11188-11038, 10989-10839, 10792-10640, 10591-10441. Total 1200 holes. Frac in 50 stages w/ 16554174g Slick Water + 27999g 7.5% HCl acid w/ 19618085# sand, RD Schlumberger 5/4/18. Turn well over to production for clean out, flowback and test.

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

Electronic Submission #430435 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 (Electronic Submission)

Date 08/09/2018

## THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By

Title

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

Documents pending BLM approvals will  
subsequently be reviewed and scannedTitle 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and  
States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

United

(Instructions on page 2)

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

\*\* OPERATOR-SUBMITTED \*\*

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"/> Resvr. Other _____			6. If Indian, Allottee or Tribe Name		
2. Name of Operator OXY USA INC.			7. Unit or CA Agreement Name and No. NMNM137096X		
3. Address P.O. BOX 4294 HOUSTON, TX 77210			8. Lease Name and Well No. MESA VERDE BS UNIT 5H		
3a. Phone No. (include area code) Ph: 713-350-4997			9. API Well No. 30-025-44185		
4. Location of Well (Report location clearly and in accordance with Federal requirements)* At surface SESE 280FSL 995FEL 32.211014 N Lat, 103.691406 W Lon At top prod interval reported below SESE 337FSL 1252FEL 32.211173 N Lat, 103.692261 W Lon At total depth NWNW 196FNL 1329FEL 32.238782 N Lat, 103.692277 W Lon			10. Field and Pool, or Exploratory MESA VERDE BONE SPRING		
14. Date Spudded 01/29/2018			11. Sec., T., R., M., or Block and Survey or Area Sec 17 T24S R32E Mer		
15. Date T.D. Reached 03/23/2018			12. County or Parish LEA		
16. Date Completed <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod. 05/04/2018			13. State NM		
17. Elevations (DF, KB, RT, GL)* 3561 GL					
18. Total Depth: MD 20505 TVD 10449			19. Plug Back T.D.: MD 20441 TVD 10449		
20. Depth Bridge Plug Set: MD TVD					
21. Type Electric & Other Mechanical Logs Run (Submit copy of each) MUD LOG			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
17.500	13.375 J55	54.5	0	974		1245	425	0	
12.250	9.625 L80	47.0	0	4694		1290	415	0	
8.500	5.500 P110	20.0	0	20290		2895	887	1273	

## 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) BONE SPRING-2ND	10441	20343	10441 TO 20343	0.420	1200	ACTIVE
B)						
C)						
D)						

## 26. Perforation Record

Depth Interval	Amount and Type of Material
10441 TO 20343	16554174G SLICK WATER & 27999G 7.5% HCL ACID W/ 19618085# 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
05/15/2018	06/04/2018	24	→	1611.0	2528.0	4796.0			FLOWS FROM WELL
Choke Size	Tbg. Press. Flwg.	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
128/128	SI	1038.0	→	1611	2528	4796		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 #430436 VERIFIED BY THE BLM WELL INFORMATION SYSTEM

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

**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.)  
SOLD**
**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
BELL CANYON	4678	5579	OIL, GAS, WATER	RUSTLER	945
CHERRY CANYON	5580	6925	OIL, GAS, WATER	SALADO	1030
BRUSHY CANYON	6926	8556	OIL, GAS, WATER	CASTILE	3249
BONE SPRING	8557	9731	OIL, GAS, WATER	DELAWARE	4663
BONE SPRING 1ST	9732	10406	OIL, GAS, WATER	BELL CANYON	4678
BONE SPRING 2ND	10407	10605	OIL, GAS, WATER	CHERRY CANYON	5580
				BRUSHY CANYON	6926
				BONE SPRING	8557

**32. Additional remarks (include plugging procedure):**

LOG HEADER, DIRECTIONAL SURVEY, AS-DRILLED C-102 PLAT AND WBD ARE ATTACHED.

**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 #430436 Verified by the BLM Well Information System.  
For OXY USA INC., sent to the Hobbs**

Name (please print) DAVID STEWART Title SR. REGULATORY ADVISOR

Signature \_\_\_\_\_ (Electronic Submission) Date 08/09/2018

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.

**\*\* ORIGINAL \*\* ORIGINAL \*\* ORIGINAL \*\* ORIGINAL \*\* ORIGINAL \*\* ORIGINAL \*\* ORIGINAL \*\***