

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT**Carlsbad Field Office**  
**OCD Hobbs**FORM APPROVED  
OMB NO. 1004-0137  
Expires: January 31, 2018Serial No.  
NMNM66925**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.****SUBMIT IN TRIPLICATE - Other instructions on page 2****HOBBS OCD**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	6. If Indian, Allottee or Tribe Name
2. Name of Operator OXY USA INCORPORATED Contact: SARAH CHAPMAN E-Mail: SARAH_CHAPMAN@OXY.COM	7. If Unit or CA/Agreement, Name and/or No. NMNM137096X
3a. Address P O BOX 4294 HOUSTON, TX 77210-4294	8. Well Name and No. MESA VERDE BS UNIT 5
3b. Phone No. (include area code) Ph: 713-350-4997	9. API Well No. 30-025-44185-00-X1
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 17 T24S R32E SESE 280FSL 995FEL 32.211014 N Lat, 103.691406 W Lon	10. Field and Pool or Exploratory Area BONE SPRINGS Mesa Verde;
	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 checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Deepen
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Hydraulic Fracturing
	<input type="checkbox"/> Production (Start/Resume)
	<input type="checkbox"/> Reclamation
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Well Integrity
	<input type="checkbox"/> Other Workover Operations
	<input type="checkbox"/> Change Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Recomplete
	<input type="checkbox"/> Plug and Abandon
	<input type="checkbox"/> Temporarily Abandon
	<input type="checkbox"/> Water Disposal
	<input type="checkbox"/> Convert to Injection
	<input type="checkbox"/> Plug Back

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 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.

RUPI 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 INCORPORATED, sent to the Hobbs  
Committed to AFMSS for processing by PRISCILLA PEREZ on 08/10/2018 (18PP1645SE)**

Name (Printed/Typed) DAVID STEWART	Title SR. REGULATORY ADVISOR
Signature (Electronic Submission)	Date 08/09/2018

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

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 _____	Signature _____

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 the jurisdiction of such department or agency.

(Instructions on page 2)

**\*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\*****Accepted for Record Only**

MSB/OCD 8/20/2018