

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.****Carlsbad Field Office**  
**OCD Hobbs**  
**HOBBS OCD**

<b>SUBMIT IN TRIPLICATE - Other instructions on page 2</b>		1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	2. Name of Operator OXY USA INCORPORATED	Contact: SARAH CHAPMAN E-Mail: SARAH_CHAPMAN@OXY.COM	3. Address P O BOX 4294 HOUSTON, TX 77210-4294	3b. Phone No. (include area code) Ph: 713-350-4997	4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 17 T24S R32E SWSE 280FSL 2624FEL 32.210987 N Lat, 103.696671 W Lon	5. Well Name and No. MESA VERDE BS UNIT 6	6. API Well No. 30-025-44042-00-X1	7. If Unit or CA/Agreement, Name and/or No. NMNM137096X	8. Field and Pool or Exploratory Area MESA VERDE	9. County or Parish, State LEA COUNTY, NM
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## 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 Workover Operations
	<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 4/6/18, RIH & clean out to PBTD @ 20395'. Pressure test 5-1/2" csg to 9800# for 30 min, good test. RIH & perf @ 20223-20139, 20089-19939, 19889-19739, 19689-19539, 19489-19339, 19289-19139, 19089-18939, 18889-18739, 18689-18539, 18489-18342, 11369-11219, 18089-17936, 17889-17741, 17689-17539, 17480-17339, 17289-17139, 17085-16939, 16892-16739, 16689-16539, 16489-16339, 16289-16139, 16089-15939, 15889-15739, 15689-15539, 15484-15339, 15284-15139, 15092-14939, 14878-14739, 14689-14539, 14490-14339, 14290-14139, 14089-13939, 13889-13739, 13689-13539, 13490-13339, 13290-13139, 13089-12939, 12889-12736, 12689-12544, 12489-12342, 12289-12141, 12089-11939, 11888-11739, 11686-11539, 11491-11339, 11289-11139, 11089-10939, 10889-10739, 10689-10539. Total 1176 holes. Frac in 49 stages w/ 15869364g Slick Water + 32508g 7.5% HCl acid w/ 19588688# sand, RD Schlumberger 05/08/18. Turn well over to production for clean out, flowback and test.

14. I hereby certify that the foregoing is true and correct.	
Electronic Submission #430622 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 (18PP1654SE)	
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 _____	/s/ Jonathon Shepard

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  
MAB/OCD 8/20/2018