

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

Operator Copy

FORM 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"/> Diff. Rev.		6. If Indian, Allottee or Tribe Name	
2. Name of Operator OXY USA INCORPORATED		7. Unit or CA Agreement Name and No. NMNM137096X	
Contact: LESLIE REEVES E-Mail: LESLIE_REEVES@OXY.COM		8. Lease Name and Well No. MESA VERDE BS UNIT 12H	
3. Address P O BOX 4294 HOUSTON, TX 77210-4294		9. API Well No. 30-025-44186-00-S1	
3a. Phone No. (include area code) Ph: 713-497-2492		10. Field and Pool, or Exploratory MESA VERDE	
4. Location of Well (Report location clearly and in accordance with Federal requirements)* Sec 18 T24S R32E Mer NMP At surface SESW 280FSL 2563FWL 32.210911 N Lat, 103.714691 W Lon Sec 7 T24S R32E Mer NMP At top prod interval reported below NWSE 350FNL 2124FEL 32.231370 N Lat, 103.712630 W Lon Sec 7 T24S R32E Mer NMP At total depth NWSE 171FNL 2124FEL 32.231415 N Lat, 103.712633 W Lon		11. Sec., T., R., M., or Block and Survey or Area Sec 18 T24S R32E Mer NMP	
14. Date Spudded 03/18/2018		15. Date T.D. Reached 06/26/2018	
16. Date Completed <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod. 08/11/2018		17. Elevations (DF, KB, RT, GL)* 3572 GL	
18. Total Depth: MD 18161 TVD 10700		19. Plug Back T.D.: MD 18113 TVD 10700	
20. Depth Bridge Plug Set: MD TVD		21. Type Electric & Other Mechanical Logs Run (Submit copy of each) GAMMARAY	
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 Sks. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
14.750	10.750 J55	45.5	0	950		1020	247	0	
9.875	7.625 L80	29.7	0	10125		1930	684	1395	
6.750	5.500 P110	20.0	0	10790		1165	408	0	
6.750	4.500 P110	13.5	10790	18151		1165	408	0	

## 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	8498	18007	10822 TO 18007	0.000	865	ACTIVE
B)						
C)						
D)						

## 27. Acid, Fracture, Treatment, Cement Squeeze, Etc.

Depth Interval	Amount and Type of Material
10822 TO 18007	12705840G SLICK WATER & 19025G OF 7.5% HCL W/ 5642890# SAND

DISTRICT II-ARTESIA O.C.D.

## 28. Production - Interval A

Date First Produced 08/19/2018	Test Date 08/30/2019	Hours Tested 24	Test Production →	Oil BBL 1804.0	Gas MCF 2994.0	Water BBL 4533.0	Oil Gravity Corr. API 1660	Gas Gravity	Production Method FLOWS FROM WELL
Choke Size 128	Tubg. Press. Flwg. SI	Csg. Press. 880.0	24 Hr. Rate →	Oil BBL 1804	Gas MCF 2994	Water BBL 4533	Gas:Oil Ratio 1660	Well Status POW	ACCEPTED FOR RECORD MAR 10 2019 BUREAU OF LAND MANAGEMENT CARLESSA FIELD OFFICE
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	Tubg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate →	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	

(See Instructions and spaces for additional data on reverse side)

ELECTRONIC SUBMISSION #442336 VERIFIED BY THE BLM WELL INFORMATION SYSTEM

\*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\*

Reclamation Due: 2/11/2019

**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	4668	5549	OIL, GAS, WATER	RUSTLER	920
CHERRY CANYON	5550	6810	OIL, GAS, WATER	SALADO	1030
BRUSHY CANYON	6811	8497	OIL, GAS, WATER	CASTILE	3310
BONE SPRING	8498	9449	OIL, GAS, WATER	DELAWARE	4636
BONE SPRING 1ST	9450	9933	OIL, GAS, WATER	BELL CANYON	4668
BONE SPRING 2ND	9934	10700	OIL, GAS, WATER	CHERRY CANYON	5550
				BRUSHY CANYON	6811
				BONE SPRING	8498

**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 #442336 Verified by the BLM Well Information System.

For OXY USA INCORPORATED, sent to the Hobbs

Committed to AFMSS for processing by DINAH NEGRETE on 03/10/2019 (19DCN0051SE)

Name (please print) DAVID STEWART

Title SR. REGULATORY ADVISOR

Signature \_\_\_\_\_ (Electronic Submission)

Date 11/01/2018

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.

**\*\* REVISED \*\* REVISED \*\* REVISED \*\* REVISED \*\* REVISED \*\* REVISED \*\* REVISED \*\***