

**HOBBS OGD**  
**SEP 04 2019**  
**RECEIVED**

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OCD *Hobbs* *Artesia*

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. NMNM55953	
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. Resvr. Other _____		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 24H	
3. Address P O BOX 4294 HOUSTON, TX 77210-4294		9. API Well No. 30-025-44561-00-S1	
3a. Phone No. (include area code) Ph: 713-497-2492		10. Field and Pool, or Exploratory MESA VERDE-BONE SPRING	
4. Location of Well (Report location clearly and in accordance with Federal requirements)* Sec 16 T24S R32E Mer NMP At surface SWSW 250FSL 1225FWL 32.210952 N Lat, 103.684226 W Lon Sec 16 T24S R32E Mer NMP At top prod interval reported below SWSW 168FSL 537FWL 32.210740 N Lat, 103.686450 W Lon Sec 9 T24S R32E Mer NMP At total depth NWNW 32FNL 373FWL 32.238803 N Lat, 103.686779 W Lon		11. Sec., T., R., M., or Block and Survey or Area Sec 16 T24S R32E Mer NMP	
14. Date Spudded 06/10/2018		15. Date T.D. Reached 09/25/2018	
16. Date Completed <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod. 11/21/2018		17. Elevations (DF, KB, RT, GL)* 3569 GL	
18. Total Depth: MD 20812 TVD 10426		19. Plug Back T.D.: MD 20757 TVD 10426	
20. Depth Bridge Plug Set: MD TVD		21. Type Electric & Other Mechanical Logs Run (Submit copy of each) GR	
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	970		1254	302	0	
12.250	9.625 L80	43.5	0	4725		1430	462	900	
8.500	5.500 P110	20.0	0	20810		3095	965	315	

24. Tubing Record

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)
2.375	10893	10893						

25. Producing Intervals

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) BONE SPRING	10338	20691	10338 TO 20691	0.000	1224	ACTIVE
B)						
C)						
D)						

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

Depth Interval	Amount and Type of Material
10338 TO 20691	391627 BBLS SLICK WATER & 20430163# 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
11/30/2018	12/21/2018	24	→	2266.0	3486.0	5407.0			GAS LIFT
Choke Size	Tbg. Press. Flwg.	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
55/128	SI		→	2266	3486	5407	1538		

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 #455392 VERIFIED BY THE BLM WELL INFORMATION SYSTEM

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

*Reclamation Due: 5/26/18*

**ACCEPTED FOR RECORD**  
 SEP - 1 2019  
*[Signature]*  
 BUREAU OF LAND MANAGEMENT  
 CARLSBAD FIELD OFFICE

*K2*

## 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	4732	5599	OIL, GAS, WATER	RUSTLER	894
CHERRY CANYON	5600	6905	OIL, GAS, WATER	SALADO	1231
BRUSHY CANYON	6906	8612	OIL, GAS, WATER	CASTILE	3276
BONE SPRING	8613	9731	OIL, GAS, WATER	DELAWARE	4705
BONE SPRING 1ST	9732	10282	OIL, GAS, WATER	BELL CANYON	4732
BONE SPRING 2ND	10283	10520	OIL, GAS, WATER	CHERRY CANYON	5600
				BRUSHY CANYON	6906
				BONE SPRING	8613

## 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 #455392 Verified by the BLM Well Information System.  
For OXY USA INCORPORATED, sent to the Hobbs  
Committed to AFMSS for processing by DEBORAH HAM on 07/16/2019 (19DMH0134SE)

Name (please print) LESLIE REEVESTitle REGULATORY ADVISOR

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

Date 02/20/2019

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 \*\***

District I  
 1623 N. French Dr., Hobbs, NM 88240  
 Phone: (505) 393-8161 Fax: (505) 393-0720  
 District II  
 811 S. First St., Artesia, NM 88210  
 Phone: (505) 744-1283 Fax: (505) 744-9720  
 District III  
 1000 Rio Grande Road, Aztec, NM 87410  
 Phone: (505) 334-4178 Fax: (505) 334-4170  
 District IV  
 1220 S. St. Francis Dr., Santa Fe, NM 87505  
 Phone: (505) 476-3468 Fax: (505) 476-3462

State of New Mexico  
 Energy, Minerals & Natural Resources Department  
**OIL CONSERVATION DIVISION**  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

Form C-102  
 Revised August 1, 2011  
 Submit one copy to appropriate  
 District Office

AMENDED REPORT  
 AS-DRIUSED

**WELL LOCATION AND ACREAGE DEDICATION PLAT**

API Number <b>30-025-44501</b>	Pool Code <b>96229</b>	Pool Name <b>Mesa Verde Bone Springs</b>
Property Code <b>30828</b>	Property Name <b>MESA VERDE BONE SPRING UNIT</b>	Well Number <b>24H</b>
OGRID No <b>16696</b>	Operator Name <b>OXY USA INC.</b>	Elevation <b>3569.3'</b>

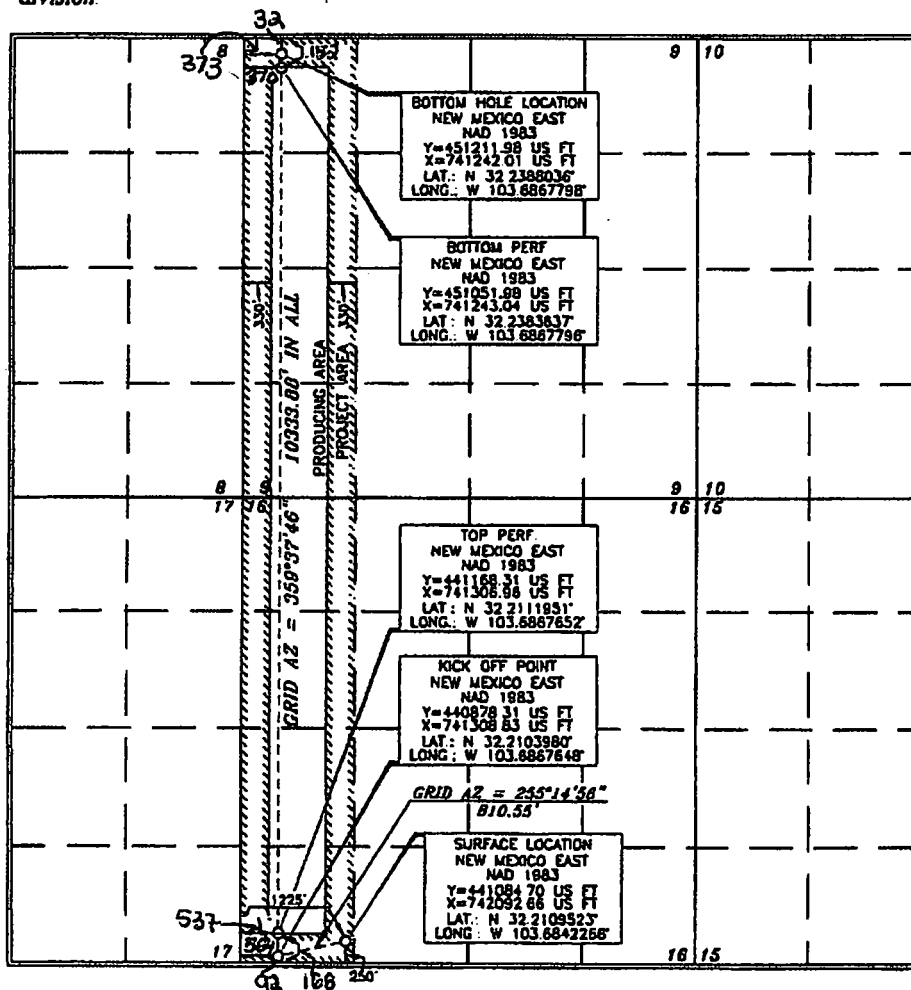
**Surface Location**

UL or lot no	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
<b>M</b>	<b>16</b>	<b>24 SOUTH</b>	<b>32 EAST, N.M.P.M.</b>		<b>250'</b>	<b>SOUTH</b>	<b>1225'</b>	<b>WEST</b>	<b>LEA</b>

**Bottom Hole Location If Different From Surface**

UL or lot no	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
<b>D</b>	<b>9</b>	<b>24 SOUTH</b>	<b>32 EAST, N.M.P.M.</b>		<b>32</b>	<b>NORTH</b>	<b>373</b>	<b>WEST</b>	<b>LEA</b>
Dedicated Acres <b>320</b>	Joint or Infill <b>4</b>	Consolidation Code	Order No.	<b>TP/FTP: 168' FSL 637' FWL</b> <b>BP/LP: 152' FNL 370' FWL</b>					

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.



**OPERATOR CERTIFICATION**

I hereby certify that the information contained herein is true and  
 complete to the best of my knowledge and belief, and that this  
 organization either owns a working interest or retained mineral  
 interest in the land including the proposed bottom hole location or  
 has a right to drill this well at this location pursuant to a contract  
 with an owner of such a mineral or working interest, or to a  
 voluntary pooling agreement or a compulsory pooling order

Authorized by the owner

Signature: *Leslie Reeves* Date: **11/19/18**

Printed Name: **LESLIE REEVES**

E-mail Address: **LESLIE-REEVES@OXY.COM**

**SURVEYOR CERTIFICATION**

I hereby certify that the well location shown on this  
 plat was placed from field notes of actual surveys  
 made by me personally supervising and that the  
 same is true and correct to the best of my belief.

Date of Survey: **JUNE 28, 2017**

Signature and Seal of Professional Land Surveyor

Signature: *Tommy Paul* Date: **8/11/2017**  
 Certificate Number: **15079**

WOF 170627WL-o (KA)