

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

State of New Mexico
Energy, Minerals & Natural Resources

Form C-104
Revised August 1, 2011

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

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

Submit one copy to appropriate District Office

☒ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address OXY USA INC. P.O. BOX 4294, HOUSTON, TX 77210		² GRID Number 16696
⁴ API Number 30-025-45921		⁵ Pool Name MESA VERDE WOLFCAMP
⁷ Property Code: 250829		⁸ Property Name: MESA VERDE WC UNIT
		⁶ Pool Code 98252
		⁹ Well Number: 8H

HOBBS OCD
DEC 30 2019
RECEIVED

II. ¹⁰ Surface Location

Ul or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County
N	17	24S	32E		280	SOUTH	1386	WEST	LEA

¹¹ Bottom Hole Location

FTP: 367' FSL 437' FWL LTP: 264' FNL 221' FWL

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
D	8	24S	32E		35	NORTH	226	WEST	LEA
¹² Lse Code F	¹³ Producing Method Code : Lift	¹⁴ Gas Connection Date: 09/13/19	¹⁵ C-129 Permit Number	¹⁶ C-129 Effective Date	¹⁷ C-129 Expiration Date				

III. Oil and Gas Transporters

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address	²⁰ O/G/W
273222	GREAT LAKES PETROLOEUM TRANSPORTATION, LLC	O
151618	ENTERPRISE FIELD SERVICES LLC	G

IV. Well Completion Data

²¹ Spud Date 05/26/2019	²² Ready Date 09/13/2019	²³ TD 12016'V/22327'M	²⁴ PBDT 12016'V/22316'M	²⁵ Perforations 12137'-22239'	²⁶ DHC, MC
²⁷ Hole Size	²⁸ Casing & Tubing Size	²⁹ Depth Set	³⁰ Sacks Cement		
14-3/4"	10-3/4"	950'	970		
9-7/8"	7-5/8"	11445'	1220		
6-3/4"	5-1/2"	22327'	780		

V. Well Test Data

³¹ Date New Oil 09/14/2019	³² Gas Delivery Date 09/13/2019	³³ Test Date 10/02/2019	³⁴ Test Length 24 Hours	³⁵ Tbg. Pressure	³⁶ Csg. Pressure 1923
³⁷ Choke Size 36/128	³⁸ Oil 4181	³⁹ Water 5640	⁴⁰ Gas 8162		⁴¹ Test Method FLOWING

⁴² 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:

Printed name:
LESLIE REEVES

Title:
REGULATORY ADVISOR

E-mail Address:
LESLIE_REEVES@OXY.COM

Date: 12/27/2019

Phone: 713-497-2492

OIL CONSERVATION DIVISION

Approved by:

Title:

Approval Date:

P. Martinez
L.M.
1/2/2020

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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 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 _____			5. Lease Serial No. NMNM66925		
2. Name of Operator OXY USA INC Contact: LESLIE REEVES E-Mail: LESLIE_REEVES@OXY.COM			6. If Indian, Allottee or Tribe Name		
3. Address PO BOX 4294 HOUSTON, TX 77210			7. Unit or CA Agreement Name and No.		
4. Location of Well (Report location clearly and in accordance with Federal requirements)* Sec 17 T24S R32E Mer At surface SESW 280FSL 1386FWL 32.210966 N Lat, 103.700808 W Lon Sec 17 T24S R32E Mer At top prod interval reported below SWSW 367FSL 437FWL 32.211220 N Lat, 103.703880 W Lon Sec 8 T24S R32E Mer At total depth NWNW 35FNL 226FWL 32.239167 N Lat, 103.703878 W Lon			8. Lease Name and Well No. MESA VERDE WC UNIT 8H		
14. Date Spudded 05/26/2019			15. Date T.D. Reached 07/24/2019		
16. Date Completed <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod. 09/13/2019			9. API Well No. 30-025-45921		
18. Total Depth: MD 22327 TVD 12016			19. Plug Back T.D.: MD 22316 TVD 12016		
20. Depth Bridge Plug Set: MD TVD			10. Field and Pool, or Exploratory MESA VERDE WOLFCAMP		
21. Type Electric & Other Mechanical Logs Run (Submit copy of each) GR			11. Sec., T., R., M., or Block and Survey or Area Sec 17 T24S R32E Mer		
12. County or Parish LEA			13. State NM		
17. Elevations (DF, KB, RT, GL)* 3563 GL					
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
14.750	10.750 J-55	45.5	0	950		970	235	0	✓
9.875	7.625 HCL-80	26.4	0	11445		1220	442	0	
6.750	5.500 P-110	20.0	0	22327		780	200	10940	

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) WOLFCAMP	12137	22239	12137 TO 22239	0.360	1008	ACTIVE
B)						
C)						
D)						

26. Perforation Record

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

Depth Interval	Amount and Type of Material
12137 TO 22239	12516504G SLICKWATER & 21226102LBS 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
09/14/2019	10/02/2019	24	▶	4181.0	8162.0	5640.0			FLows FROM WELL
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
36/128		1923.0	▶	4181	8162	5640	1952	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. 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 #497091 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.)
CAPTURED

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
CHERRY CANYON	5564	6856		RUSTLER	872
BRUSHY CANYON	6857	8566		SALADO	1148
BONE SPRING	8567	9500		CASTILE	3273
BONE SPRING 1ST	9501	9960		DELAWARE	4661
BONE SPRING 2ND	9961	10865		CHERRY CANYON	5564
BONE SPRING 3RD	10866	12276		BRUSHY CANYON	6857
WOLFCAMP	12277	22327		BONE SPRING	8567
				BONE SPRING 1ST	9501

32. Additional remarks (include plugging procedure):
Log Header, directional survey, WBD attached.

Tubing exception sundry submitted separately. (ES#496707)

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 #497091 Verified by the BLM Well Information System.
For OXY USA INC, sent to the Hobbs

Name (please print) LESLIE REEVES

Title REGULATORY ADVISOR

Signature (Electronic Submission)

Date 12/27/2019

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.

**** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL ****