

UNITED STATES **OPERATOR'S COPY**  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTFORM APPROVED  
OMB No. 1004-0137  
Expires: March 31, 2007**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 reverse side.**1. Type of Well  
☒ Oil Well. ☐ Gas Well ☐ Other

2. Name of Operator OXY USA WTP LP

192463

3a. Address  
P.O. Box 50250 Midland, TX 797103b. Phone No. (include area code)  
432-685-5717

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1980 FWL 660 FWL SWNW 1/4 Sec 12 T15S R23E

5. Lease Serial No.

NM05608

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

NM-91035

8. Well Name and No.

Bone Flats 12 Federal Com #2

9. API Well No.

30-015-28304

10. Field and Pool, or Exploratory Area

Deeper Draw South of Bone Flats

11. County or Parish, State

Eddy NM

## 12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" 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 type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<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 TA Extension
	<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 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 shall 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 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

Bone Flats 12 Federal Com. #2

TD-8000' PBTD-7714' Perfs-7774-7894' CIBP-7724'

OXY USA WTP LP respectfully requests to extend the Temporarily Abandon Status Approval.

This will allow OXY to evaluate the current Glorieta-Yeso recompletions currently being done.

This well passed a casing integrity test 1/6/11, copy attached.

After 12-1-12 the well must be online  
or plans to P & A must be submitted.

THIS IS THE LAST TA APPROVAL

14. I hereby certify that the foregoing is true and correct.

Name (Printed/Typed)

David Stewart

Title Regulatory Advisor

Signature

Date

11/11/11

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

Approved by

/s/ JD Whitlock Jr

Title

LPE7

Date

12/5/11

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

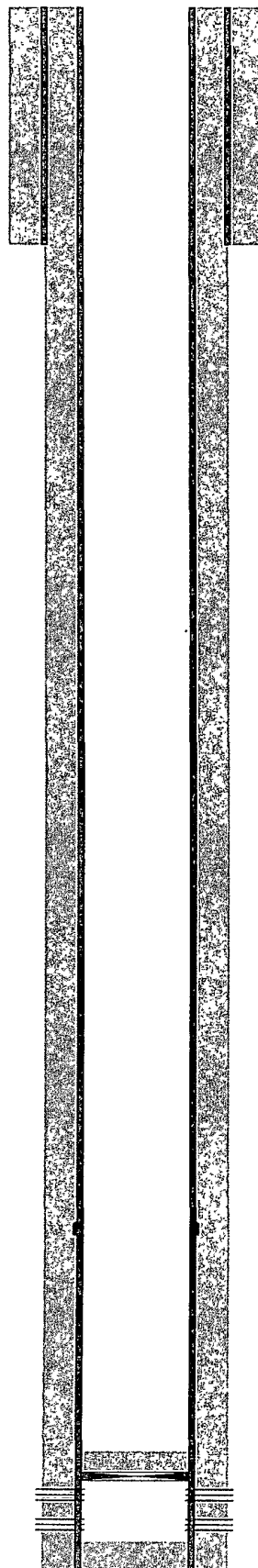
CFO

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.

(Instructions on page 2)

OXY USA WTP LP - Current  
Bone Flats 12 Federal Com. #2  
API No. 30-015-28304

12-1/4" hole @ 1212'  
9-5/8" csg @ 1212'  
w/ 600sx-TOC-Surf-Circ



5/00-CIBP @ 7724' w/ 10' cmt

8-3/4" hole @ 8000'  
7" csg @ 7998'  
DVT @ 6338'  
w/ 1200sx-TOC-Surf-Circ

Perfs @ 7774-7894'

TD-8000'

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OCD-ARTESIA

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NM-91035

8 Well Name and No.

Bone Flats 12 #2

Federal Com ✓

9. API Well No.

30-015-28304 ✓

10 Field and Pool, or Exploratory Area

South Dagger Draw/

Upper Pen Associate ✓

11. County or Parish, State

Eddy NM

1 Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

OXY USA WTP LP (Attn: Jereme Robinson 15.022) ✓

3a. Address

P.O. Box 27757, Houston, TX 77227-7757

3b. Phone No (include area code)

713.366-5360

4 Location of Well (Footage, Sec., T, R., M., or Survey Description)

E Sec. 12, T21S, R23E

1980' FNL 660' FWL

Lat. 32.494790

Long. 103.562010

## 12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

## TYPE OF SUBMISSION.

☐ Notice of Intent☒ Subsequent Report☐ Final Abandonment Notice

## TYPE OF ACTION

☐ Acidize☐ Deepen☐ Production (Start/Resume)☐ Water Shut-Off☐ Alter Casing☐ Fracture Treat☐ Reclamation☐ Well Integrity☐ Casing Repair☐ New Construction☐ Recomplete☐ Other☐ Change Plans☐ Plug and Abandon☒ Temporarily Abandon☐ Convert to Injection☐ Plug Back☐ Water Disposal

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OXY USA WTP LP request an extension T/A for a period of 1 for future Yeso Recompleat.

TD: 8000' CIBP @ 7724' w/ 10' cmt Perfs: 7774-7894'

Well passed MIT 01/06/2011, BLM witness Paul Swartz. See attached chart and Wellbore Diagram.

Accepted for record

NMOCD RT  
2/16/11

Well is approved to be TA/ST for a period of 1 year or until 12/3/2011. The BLM reserves the right to refuse to extend this TA. Operator has requested an annual renewal option for 3 years. TA to be review annually. No TA will extend past 6/9/2013, This is from the date of the first TA request.

RECEIVED  
FEB 15 2011  
NMOCD ARTESIA14. I hereby certify that the foregoing is true and correct  
Name (Printed/Typed)

Jereme Robinson/ jereme\_robinson@oxy.com

Title

Regulatory Analyst

Date

01/16/2010

## THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

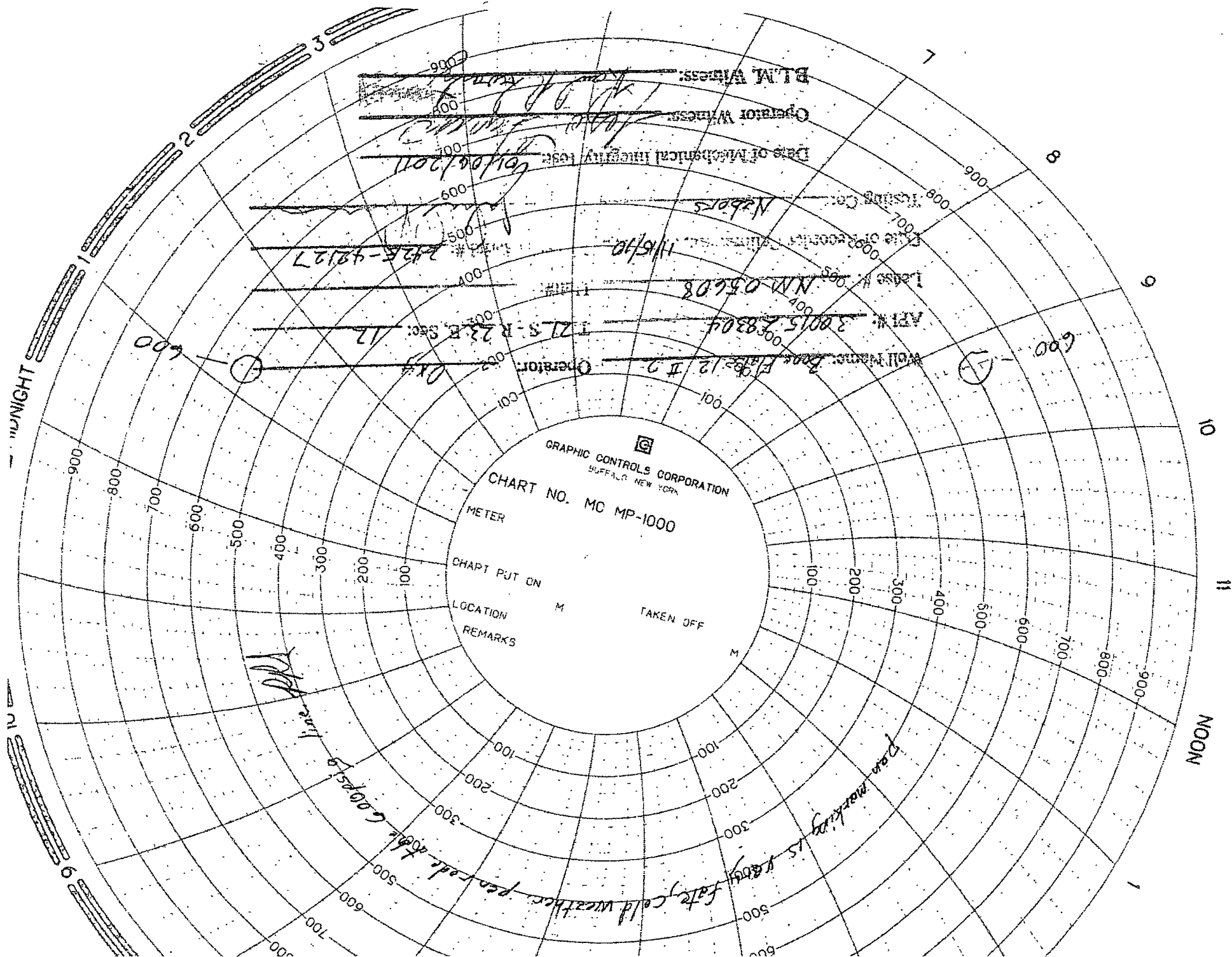
Date

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115



GRAPHIC CONTROLS CORPORATION  
BUFFALO, NEW YORK

CHART NO. MC MP-1000

METER

CHART PUT ON

LOCATION

REMARKS

TAKEN OFF

NOON

MIDNIGHT

Barometric Pressure

Operator's Name

Date of Mechanical Integrity Test

11/5/10

APR 15 3 0015 28304

Operator

OK

600

pan marking is 1.800, fat, cold weather, per cell 400