

UNITED STATES  
DEPARTMENT OF THE INTERIOR **OCD Artesia**  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
OMB NO. 1004-0135  
Expires: July 31, 2010

**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.*

5. Lease Serial No.  
NMNM62590

6. If Indian, Allottee or Tribe Name

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

**SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		8. Well Name and No. FEDERAL 26 13H
2. Name of Operator OXY USA INC.		9. API Well No. 30-015-41600
3a. Address P.O. BOX 50250 MIDLAND, TX 79710		10. Field and Pool, or Exploratory LIVINGSTON RIDGE DELAWARE
3b. Phone No. (include area code) Ph: 432-685-5717 Fx: 432-685-5742		11. County or Parish, and State EDDY COUNTY, NM
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 26 T22S R31E NWNE 667FNL 2378FEL 32.368689 N Lat, 103.747285 W Lon		

**12. CHECK 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"/> 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
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Drilling Operations
	<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 recompleat 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 recompleat 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.)

8/24/14 Drill 7-7/8" hole to 12747'M 8304'V. RIH & set 5-1/2" 17# P-110 PDX csg @ 12730', DVT @ 4603', ECP @ 4624'. Pump 60bbl FW spacer then cmt.w/ 870sx (539bbl) PPC w/ additives @ 9.8ppg 3.46 yield followed by 770sx (228bbl) PPH w/ additives @ 13.2ppg 1.66 yield, had partial returns during job, no cmt to surface, Open DVT, circ, M&P 400sx (143bbl) PPC light w/ additives @ 12.44ppg, 2 yield followed by 100sx PPC @ 14.8ppg 1.33yield, circ 14sx (5bbl) cmt to surface, ND BOP, install wellhead, test to 5200# for 15min, tested good. RD Rel Rig 9/9/14.

**NM OIL CONSERVATION**  
ARTESIA DISTRICT

APR 13 2015

*RD 1/28/15*  
**Accepted for record**  
**NMOCD**

**RECEIVED**

14. I hereby certify that the foregoing is true and correct. <b>Electronic Submission #263673 verified by the BLM Well Information System</b> <b>For OXY USA INC., sent to the Carlsbad</b> <b>Committed to AFMSS for processing by DEBORAH HAM on 04/03/2015</b>		<b>ACCEPTED FOR RECORD</b>
Name (Printed/Typed) DAVID STEWART	Title SR. REGULATORY ADVISOR	
Signature (Electronic Submission)	Date 09/15/2014	APR - 3 2015

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

**ACCEPTED FOR RECORD**  
APR - 3 2015  
*[Signature]*  
**BUREAU OF LAND MANAGEMENT**  
**CARLSBAD FIELD OFFICE**

Approved By _____	Title _____
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 _____

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.

**\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\***