

MAY 11 2015

RECEIVED RECEIVED

1. WELL API NO.
30-015-42797

2. Type of Lease
 STATE FEE FED/INDIAN

3. State Oil & Gas Lease No.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

4. Reason for filing:
 COMPLETION REPORT (Fill in boxes #1 through #31 for State and Fee wells only)
 C-144 CLOSURE ATTACHMENT (Fill in boxes #1 through #9, #15 Date Rig Released and #32 and/or #33; attach this and the plat to the C-144 closure report in accordance with 19.15.17.13.K NMAC)

5. Lease Name or Unit Agreement Name
Cedar Canyon 15 SWD

6. Well Number:
1

7. Type of Completion:
 NEW WELL WORKOVER DEEPENING PLUGBACK DIFFERENT RESERVOIR OTHER SWD-1510

8. Name of Operator
OXY USA Inc.

9. OGRID
16696

10. Address of Operator
P.O. Box 50250 Midland, TX 79710

11. Pool name or Wildcat
SWD Devonian-Silurian

12. Location	Unit Ltr	Section	Township	Range	Lot	Feet from the	N/S Line	Feet from the	E/W Line	County
Surface:	K	15	24S	29E		2500	South	1400	West	Eddy
BH:										

13. Date Spudded: 1/14/15
14. Date T.D. Reached: 3/10/15
15. Date Rig Released: 3/12/15
16. Date Completed (Ready to Produce) Subject: 5/5/14
17. Elevations (DF and RKB, RT, GR, etc.): 2928' GR

18. Total Measured Depth of Well: 16014'
19. Plug Back Measured Depth: 15964'
20. Was Directional Survey Made?: YES
21. Type Electric and Other Logs Run: ML/CBL/GR/CLL/PE

22. Producing Interval(s), of this completion - Top, Bottom, Name
14842-15964' Devonian-Silurian

23. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
18 3/8"	87.5# J55	277'	24"	900sx-Surf Circ	NA
13 3/8"	54.5# J55	3107'	17 1/2"	2720sx-Surf Circ	W/A
9 5/8"	47# L80	10155'	12 1/4"	3450sx-Surf Circ	NA

24. LINER RECORD

SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	25. TUBING RECORD SIZE	DEPTH SET	PACKER SET
7"	9755'	14842'	630-TDC 9755' Circ		4 1/2"	14781'	14781'

26. Perforation record (interval, size, and number)
Open hole @ 14842-15964'

27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC.
DEPTH INTERVAL: 14842-15964'
AMOUNT AND KIND MATERIAL USED: 250205 15% HCl Acid w/ 965367 cc of Na

28. PRODUCTION

Date First Production: [Blank]
Production Method (Flowing, gas lift, pumping - Size and type pump): [Blank]
Well Status (Prod. or Shut-in): Shut-In

Date of Test	Hours Tested	Choke Size	Prod'n For Test Period	Oil - Bbl	Gas - MCF	Water - Bbl.	Gas - Oil Ratio

Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate	Oil - Bbl.	Gas - MCF	Water - Bbl.	Oil Gravity - API - (Corr.)

29. Disposition of Gas (Sold, used for fuel, vented, etc.): [Blank]
30. Test Witnessed By: [Blank]

31. List Attachments
C103 Directional Survey, Loss, WBI

32. If a temporary pit was used at the well, attach a plat with the location of the temporary pit.

33. If an on-site burial was used at the well, report the exact location of the on-site burial:

Latitude Longitude NAD 1927 1983

I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief

Signature: [Signature] Printed Name: David Stewart Title: Sr. Regulatory Advisor Date: 5/31/15

E-mail Address: david_stewart@oxy.com

810
9/9/15

