

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NMOCD
Artesia

FORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 2018

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.
NMNM89819

6. If Indian, Allottee or Tribe Name

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

SUBMIT IN TRIPLICATE - Other instructions on page 2

8. Well Name and No.
PATTON MDP1 18 FEDERAL 2H

9. API Well No.
30-015-44337

10. Field and Pool or Exploratory Area
COTTON DRAW; BONE SPRING

11. County or Parish, State
EDDY COUNTY, NM

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
OXY USA INC. Contact: SARAH MITCHELL
E-Mail: sarah_mitchell@oxy.com

3a. Address
P.O. BOX 50250
MIDLAND, TX 79710

3b. Phone No. (include area code)
Ph: 432-699-4318

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 18 T24S R31E Mer NMP NENW 170FNL 1898FWL
32.224124 N Lat, 103.819529 W Lon

12. CHECK THE 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"/> Hydraulic Fracturing	<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 Drilling Operations
	<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 recomplete 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 must 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 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

11/5/17 NU BOP, test @ 250 psi low, 5000 psi high, good test. Test csg to 1900 psi for 30 min, good test. RIH & tag cmt @ 598', perform FIT test EMW = 18.5 PPG, 310 psi. Drill 12-1/4" hole to 4353' (11/7/17). RIH & set 9-5/8" 47# L-80 BTC csg @ 4343', pump 20 BBLs gel spacer w/ red dye and cmt w/ 1055 sks (353 BBLs) PPC w/ additives 12.9 PPG, 1.88 yield followed by 160 sks (38 BBLs) PPC w/ additives, 14.8 PPG, 1.33 yield. Circ. 70 BBLs to surface. BLM reps Gabriel Beneway, David Mervine and Mandela Kamau on location to witness cmt job. Tested csg to 4800 psi for 30 min., good test. Install pack off, test pack off to 5000 psi for 15 min, good test.

NM OIL CONSERVATION
ARTESIA DISTRICT
DEC 05 2017

BC 12-5-17
Accepted for record - NMOCD

RECEIVED
[Handwritten Signature]

14. I hereby certify that the foregoing is true and correct.
Electronic Submission #395301 verified by the BLM Well Information System
For OXY USA INC., sent to the Carlsbad
Committed to AFMSS for processing by JENNIFER SANCHEZ on 11/21/2017 ()
Name (Printed/Typed) DAVID STEWART Title SR. REGULATORY ADVISOR
Signature (Electronic Submission) Date 11/16/2017

ACCEPTED FOR RECORD

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

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 _____

BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD 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.

(Instructions on page 2)

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