Form 3160-5 (June 2015)

UNITED STATIS ARISDAD FIELD OFFI OMB Expires: BUREAU OF LAND MANAGEMENT A PROCESS Serial No. NMNM77018

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

Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.					INIVINIVI//UTO	ı	
					6. If Indian, Allotte	ee or Tribe Name	
SUBMIT IN TRIPLICATE - Other instructions on page 2					7. If Unit or CA/A	greement, Name and/or No.	
 Type of Well ☐ Gas Well ☐ Other 					8. Well Name and No. LENGTH CC 6_7 FEDERAL COM 25H		
Name of Operator OXY USA INCORPORATED	IOLA om		9. API Well No. 30-015-45566-00-X1				
3a. Address 5 GREENWAY PLAZA SUITE 110 HOUSTON, TX 77046-0521 3b. Phone No. Ph: 432-68			o. (include area co 35-5936	ode)	10. Field and Pool or Exploratory Area PIERCE CROSSING-BONE SPRING		
4. Location of Well (Footage, Sec., T	<u>.</u>	····· s	11. County or Parish, State				
Sec 6 T24S R29E 65FNL 107 32.254028 N Lat, 104.018715			EDDY COUNTY, NM				
12. CHECK THE AI	PPROPRIATE BOX(ES)	TO INDICA	TE NATURE	OF NOTICE	E, REPORT, OR O	THER DATA	
TYPE OF SUBMISSION	TYPE OF ACTIO						
☐ Notice of Intent	☐ Acidize ☐ De		epen Product		ction (Start/Resume)	■ Water Shut-Off	
Subsequent Report	☐ Alter Casing	☐ Hyd	raulic Fracturii	ng 🔲 Reclar	mation	■ Well Integrity	
	☐ Casing Repair		Construction	- 🗖 Recon	nplete		
☐ Final Abandonment Notice			g and Abandon		orarily Abandon	Drining Operations	
	Convert to Injection Plug eration: Clearly state all pertinent details, include		•	☐ Water Disposal			
Attach the Bond under which the wor following completion of the involved testing has been completed. Final Abdetermined that the site is ready for fi Spud 17-1/2" hole 3/7/19, drill 20BFW spacer then cmt w/ 51 throughout job, circ 206sx (50)	operations. If the operation res andonment Notices must be file nal inspection. to 435' 3/7/19. RIH & set 0sx (124bbl) Class C w/ a	sults in a multipled only after all 13-3/8" 54.5 additives 14.8	e completion or requirements, inc # J-55 csg @ Bppg 1.36 yiel	recompletion in a cluding reclamati 425', pump	a new interval, a Form 3 on, have been complete	160-4 must be filed once d and the operator has	
					1	RECEIVED	
	. (ccepted for	1/5/19 record NM	OCD	•	APR 0 1. 2019 CT II-ARTESIA O.C.D.	
14. I housely contifue that the formaning is	4						
14. I hereby certify that the foregoing is Com	Electronic Submission #4	INCORPORA	TEĎ, sent to t	he Carlsbad	•	•	
Name (Printed/Typed) JANA MENDIOLA				ULATORY SF	` ,		
	-						
Signature (Electronic S	ubmission)		Date 03/14	1/2019			
	THIS SPACE FO	R FEDERA	L OR STAT	E OFFICE U	JSE		
Approved By			Title Ac	cepted fo	or Record	MAR 1 5 2019	
Conditions of approval, if any, are attached ertify that the applicant holds legal or equivalent would entitle the applicant to conduction	itable title to those rights in the		Office	Jonathon S Carlsbad Fle	•		
Fitle 18 U.S.C. Section 1001 and Title 43 V States any false, fictitious or fraudulent s					nake to any department	or agency of the United	