State of New Mexico Energy Minerals and Natural Resources

Oil Conservation Division 1220 South St. Francis Dr. Santa Fe. NM 87505 Submit 1 Copy to appropriate District Office in accordance with 19.15.29 NMAC.

1220 S. St. Francis Dr., Santa Fe, NM 87505	Santa F	e, NM 875	505				
Release N	Notificatio	n and Co	orrective A	ction			
Name of Company OXY USA INC		<b>OPERA</b> '	ГOR	📋 Initi	al Report	$\boxtimes$	Final Report
Name of Company OXY USA INC	Al a	Contact	outo		-		-
Address PO BOX 4294; HOUSTON, TX 77210		Jennifer Duarte					
Facility Name CEDAR CANYON CDP Harr	0UN9#1	Facility Typ					
Surface Owner M	lineral Owner			API No	. 30-01	15-0	34997
	LOCATIO	N OF RE	LEASE			-	
Unit LetterSectionTownshipRangeP924S29E		/South Line	Feet from the	East/West Line	County		
Latitude32.2267	7	Longitud	le103.983	· · · · · · · · · · · · · · · · · · ·	<u> </u>		
	NATURE	OF REL	EASE				
Type of Release GAS - FLARE		Release 19780 N					
Source of Release GAS – FLARE	01/04/201	lour of Occurrenc 6 – BEGAN 6 – ENDED	e Date and	Date and Hour of Discovery			
Was Immediate Notice Given?	] Not Required	If YES. To		I			
By Whom?	Date and Hour						
Was a Watercourse Reached?	If YES, Volume Impacting the Watercourse.						
Describe Cause of Problem and Remedial Action Taken. Enterprise had high line pressure and compressors down.		re back up an	d running	N	VI OIL CO		RVATION
Describe Area Affected and Cleanup Action Taken.*	FEB 0'9 2016						
					REC	EIVE	ED
I hereby certify that the information given above is true a regulations all operators are required to report and/or file public health or the environment. The acceptance of a C- should their operations have failed to adequately investig or the environment. In addition, NMOCD acceptance of federal, state, or local laws and/or regulations.	certain release r -141 report by th ate and remedia	notifications a ne NMOCD m te contaminat	nd perform correct harked as "Final R ion that pose a thr ve the operator of	ctive actions for rel eport" does not rel eat to ground wate responsibility for c	eases which ieve the oper r, surface wa ompliance w	may er rator of iter, hu /ith any	ndanger f liability man health
Signature: prilo Duart	OIL CONSERVATION DIVISION Signed By Filler Lineman						
Printed Name: JENNIFER DUARTE			211111		11//	 1	
Title: ENVIRONMENTAL SPECIALIST		Approval Da	te: 6 11 11	$\rho$   Expiration	Date: N/ F	1	
E-mail Address: jennifer_duarte@oxy.com	12.6640	Conditions o	f Approval:	NAL	Attached		-
Date: 02/08/2016 Phone: 713-51   * Attach Additional Sheets If Necessary	13-0040					2RP	.3544