

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTEMNRD-OCD ARTESIA
REC'D: 7/08/2020FORM APPROVED
OMB No. 1004-0137
Expires: July 31, 2010

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Dry <input type="checkbox"/> Other				5. Lease Serial No. NMNM0545035	
b. Type of Completion <input checked="" type="checkbox"/> New Well <input type="checkbox"/> Work Over <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Diff. Resvr. Other _____				6. If Indian, Allottee or Tribe Name	
2. Name of Operator OXY USA INCORPORATED				Contact: SARAH CHAPMAN E-Mail: schapman@spurepllc.com	
3. Address 5 GREENWAY PLAZA SUITE 110 HOUSTON, TX 77046-0521				3a. Phone No. (include area code) Ph: 832-930-8613	
4. Location of Well (Report location clearly and in accordance with Federal requirements)* At surface SWSW 690FSL 920FWL 32.270073 N Lat, 103.805382 W Lon Sec 29 T23S R31E Mer NMP At top prod interval reported below SWSW 389FSL 459FWL 32.269260 N Lat, 103.806880 W Lon Sec 17 T23S R31E Mer NMP At total depth NWSW 2624FSL 387FWL 32.304416 N Lat, 103.806963 W Lon				8. Lease Name and Well No. PURE GOLD MDP1 29-17 FED COM 1H	
14. Date Spudded 02/21/2019				15. Date T.D. Reached 05/26/2019	
16. Date Completed <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod. 06/25/2019				9. API Well No. 30-015-45645-00-S1	
18. Total Depth: MD 23106 TVD 10038				19. Plug Back T.D.: MD 23028 TVD 10038	
20. Depth Bridge Plug Set: MD TVD				10. Field and Pool, or Exploratory INGLE WELLS	
21. Type Electric & Other Mechanical Logs Run (Submit copy of each) GAMMARAY MUDLOG				11. Sec., T., R., M., or Block and Survey or Area Sec 29 T23S R31E Mer NMP	
22. Was well cored? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Was DST run? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Directional Survey? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (Submit analysis)				12. County or Parish EDDY	
23. Casing and Liner Record (Report all strings set in well)				13. State NM	
17. Elevations (DF, KB, RT, GL)* 3349 GL					

Hole Size	Size/Grade	Wt. (#/ft.)	Top (MD)	Bottom (MD)	Stage Cementer Depth	No. of Sk. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
6.750	5.500 S-95	20.0		23076		1005	258	8700	
17.500	13.375 J-55	45.5	0	688		870	210	0	
12.250	9.625 HCL-80	43.5	0	4191		1175	377	0	
8.500	7.625 F-25	26.4	0	9216		556	174	0	

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) BONE SPRING	10297	22996	10297 TO 22996	0.420	1512	ACTIVE
B)						
C)						
D)						

Depth Interval	Amount and Type of Material
10297 TO 22996	17326260GAL SLICKWATER AND 23458099# SAND

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
07/07/2019	07/11/2019	24	→	7150.0	8214.0	11420.0			FLows FROM WELL
Choke Size	Tbg. Press. Flwg.	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
128/128	SI	823.0	→	7150	8214	11420		POW	

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg.	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
SI			→						

(See Instructions and spaces for additional data on reverse side)

ELECTRONIC SUBMISSION #490119 VERIFIED BY THE BLM WELL INFORMATION SYSTEM

** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED **

28b. Production - Interval C									
Date First Produced	Test Date	Hours Tested	Test Production →	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate →	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	

28c. Production - Interval D									
Date First Produced	Test Date	Hours Tested	Test Production →	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate →	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	

29. Disposition of Gas(*Sold, used for fuel, vented, etc.*)
SOLD

30. Summary of Porous Zones (Include Aquifers): Show all important zones of porosity and contents thereof: Cored intervals and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures and recoveries.	31. Formation (Log) Markers
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Formation	Top	Bottom	Descriptions, Contents, etc.	Name	Top Meas. Depth
BELL CANYON	4134	5018	OIL, GAS, WATER	RUSTLER	422
CHERRY CANYON	5019	6272	OIL, GAS, WATER	SALADO	732
BRUSHY CANYON	6273	8010	OIL, GAS, WATER	CASTILE	2640
BONE SPRING	8011	8846	OIL, GAS, WATER	DELAWARE	4090
BONE SPRING 1ST	8847	9325	OIL, GAS, WATER	BELL CANYON	4134
BONE SPRING 2ND	9326	9500	OIL, GAS, WATER	CHERRY CANYON	5019
				BRUSHY CANYON	6273
				BONE SPRING	8011

32. Additional remarks (include plugging procedure):
 LOG HEADER, DIIRECTIONAL SURVEY, AS DRILLED C-102, SUPPLEMENTAL AND WBD ATTACHED.

33. Circle enclosed attachments:			
1. Electrical/Mechanical Logs (1 full set req'd.)	2. Geologic Report	3. DST Report	4. Directional Survey
5. Sundry Notice for plugging and cement verification	6. Core Analysis	7 Other:	

34. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records (see attached instructions):

Electronic Submission #490119 Verified by the BLM Well Information System.
For OXY USA INCORPORATED, sent to the Carlsbad
Committed to AFMSS for processing by DEBORAH HAM on 12/08/2019 (20DMH0075SE)

Name(*please print*) SARAH CHAPMAN Title REGULATORY DIRECTOR

Signature _____ (Electronic Submission) Date 10/29/2019

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.

Revisions to Operator-Submitted EC Data for Well Completion #490119

	Operator Submitted	BLM Revised (AFMSS)
Lease:	NMNM0545035	NMNM0545035
Agreement:		
Operator:	OXY USA INC. P.O. BOX 4294 HOUSTON, TX 77210 Ph: 713-350-4997	OXY USA INCORPORATED 5 GREENWAY PLAZA SUITE 110 HOUSTON, TX 77046-0521 Ph: 713.350.4816
Admin Contact:	SARAH CHAPMAN REGULATORY SPECIALIST E-Mail: SARAH_CHAPMAN@OXY.COM Cell: 281-642-5503 Ph: 713-350-4997	SARAH CHAPMAN REGULATORY DIRECTOR E-Mail: schapman@spurepllc.com Ph: 832-930-8613
Tech Contact:	SARAH CHAPMAN REGULATORY SPECIALIST E-Mail: SARAH_CHAPMAN@OXY.COM Cell: 281-642-5503 Ph: 713-350-4997	SARAH CHAPMAN REGULATORY DIRECTOR E-Mail: schapman@spurepllc.com Ph: 832-930-8613
Well Name: Number:	PURE GOLD MDP1 29-17 FEDERAL C 1H	PURE GOLD MDP1 29-17 FED COM 1H
Location:		
State:	NM	NM
County:	EDDY	EDDY
S/T/R:	Sec 29 T23S R31E Mer NMP	Sec 29 T23S R31E Mer NMP
Surf Loc:	SWSW 690FSL 920FWL 32.270073 N Lat, 103.805382 W Lon	SWSW 690FSL 920FWL 32.270073 N Lat, 103.805382 W Lon
Field/Pool:	INGLE WELLS BONE SPRING	INGLE WELLS
Logs Run:	GAMMA RAY, MUD LOG	GAMMARAY MUDLOG
Producing Intervals - Formations:	BONE SPRING	BONE SPRING
Porous Zones:	BELL CANYON CHERRY CANYON BRUSHY CANYON BONE SPRING 1ST BONE SPRING 2ND BONE SPRING	BELL CANYON CHERRY CANYON BRUSHY CANYON BONE SPRING BONE SPRING 1ST BONE SPRING 2ND
Markers:	RUSTLER SALADO CASTILE DELAWARE BELL CANYON CHERRY CANYON BRUSHY CANYON BONE SPRING	RUSTLER SALADO CASTILE DELAWARE BELL CANYON CHERRY CANYON BRUSHY CANYON BONE SPRING