

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT  
APR 13 2015FORM APPROVED  
OMB NO. 1004-0135  
Expires: July 31, 2010**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.  
NMNM23417

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.  
SOUTH LOCO HILLS UNIT 189. API Well No.  
30-015-0351710. Field and Pool, or Exploratory  
LOCO HILLS QN GB SA11. County or Parish, and State  
EDDY COUNTY, NM**SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

1. Type of Well

☐ Oil Well ☐ Gas Well ☒ Other: INJECTION2. Name of Operator  
OXY USA INC.Contact: DAVID STEWART  
E-Mail: david\_stewart@oxy.com3a. Address  
P.O. BOX 50250  
MIDLAND, TX 797103b. Phone No. (include area code)  
Ph: 432-685-5717  
Fx: 432-685-5742

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Sec 19 T18S R29E SWSE 660FSL 1980FEL  
32.727437 N Lat, 104.111986 W Lon**12. CHECK 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"/> Fracture Treat	<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 type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input checked="" 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 recompleat 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 shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

2/2/2015 MIRU PU

2/3/2015 NDWH, NUBOP, rel pkr, POOH w/ pkr &amp; tbg, RIH &amp; tag up @ 2280'.

2/4/2015 RIH w/ CIBP & tag up @ 2275', contact Terry Wilson-BLM rec approval to set @ 2274'. Set CIBP @ 2274', POOH. RIH & tag CIBP @ 2274', circ hole w/ 10# MLF, test csg to 500#, tested good. M&P 35sx CL C cmt w/ 2% CaCl<sub>2</sub>, PUH, WOC. RIH & tag cmt @ 1751'. POOH. RIH & set pkr @ 855', RIH & perf @ 1350', EIR @ 4BPM @ 250#, M&P 30sx CL C cmt, WOC.

2/5/2015 RIH & tag cmt @ 1133', PUH & set pkr @ 411', RIH & perf @ 907', EIR @ 2BPM @ 200#, M&P 30sx CL C cmt w/ 2% CaCl<sub>2</sub>, WOC. RIH & tag cmt @ 690'. PUH & set pkr @ 71', RIH & perf @ 514', EIR @ 2.5BPM @ 50#, M&P 120sx CL C cmt, circ to surf. ND BOP, NUWH.

DECLARATION  
DCE 8-4-15JRS 4/28/15  
Accepted for record  
NMOCAccepted as to plugging of the well bore.  
Liability under bond is retained until:

Surface restoration is completed.

14. I hereby certify that the foregoing is true and correct.

Electronic Submission #290892 verified by the BLM Well Information System  
For OXY USA INC., sent to the Carlsbad  
Committed to AFMSS for processing by LINDA DENNISTON on 02/10/2015 ( )

Name (Printed/Typed) DAVID STEWART

Title SR. REGULATORY ADVISOR

Signature (Electronic Submission)

Date 02/09/2015

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved By

Title

Date

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

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 any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

BUREAU OF LAND MANAGEMENT  
CARLSBAD FIELD OFFICE**\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\***

**Additional data for EC transaction #290892 that would not fit on the form**

**32. Additional remarks, continued**

2/6/2015 Visually verify and top off well w/ cmt, RDPU.