

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OCD Artesia

FORM 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.***SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM62590
2. Name of Operator OXY USA INC.		6. If Indian, Allottee or Tribe Name
3a. Address P.O. BOX 50250 MIDLAND, TX 79710		7. If Unit or CA/Agreement, Name and/or No.
3b. Phone No. (include area code) Ph: 432-685-5717 Fx: 432-685-5742		8. Well Name and No. FEDERAL 26 12H
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 23 T22S R31E SESE 1043FSL 528FEL 32.372493 N Lat, 103.741297 W Lon		9. API Well No. 30-015-41573
		10. Field and Pool, or Exploratory LIVINGSTON RIDGE DELAWARE
		11. County or Parish, and State EDDY COUNTY, NM

**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 checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Drilling Operations
	<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.)

9/21/14 Drill 7-7/8" hole to 13730'M 8451'V, 10/7/14. RIH & set 5-1/2" 17# P110 DQX csg @ 13730', DVT @ 4551', ECP @ 4588'. Pump 50bbl FW spacer then cmt w/ 1260sx (538bbl) Tuned Light PPC w/ additives @ 9.76ppg 3.485 yield followed by 950sx (279bbl) PPH w/ additives @ 13.2ppg 1.656 yield, with partial returns, but no cmt to surface. Drop bomb to open DVT, pressure up to 2500#, didn't open, increase pressure to 4900#, pressure went down to 1700#, attempt to EIR, pump 1/2bbl pressure increased to 2500#, increase to 3000#, held for 30min with no loss. Contact Chris Walls-BLM, rec approval to set RPB, test and release rig. RIH w/ RPB & set @ 4450', pressure test to 1000# for 30 min, tested good. ND BOP, install wellhead, test to 5000# for 15min, tested good. RD Rel Rig 10/11/14.

**NM OIL CONSERVATION**

ARTESIA DISTRICT

MAY 04 2015

Accepted for record  
NMOC

RECEIVED

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

Electronic Submission #271476 verified by the BLM Well Information System

For OXY USA INC., sent to the Carlsbad

Committed to AFMSS for processing by DEBORAH HAM on 04/20/2015

Name (Printed/Typed) DAVID STEWART

Title SR. REGULATORY ADVISOR

Signature (Electronic Submission)

Date 10/16/2014

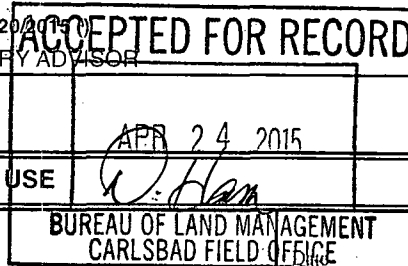
**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

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



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.

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