

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTNM OIL CONSERVATION
ARTESIA DISTRICT

NOV 26 2019

FORM APPROVED
OMB No. 1004-0137
Expires: July 31, 2010

WELL COMPLETION OR RECOMPLETION REPORT AND LOG RECEIVED

1a. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Dry <input type="checkbox"/> Other			6. If Indian, Allottee or Tribe Name		
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 _____			7. Unit or CA Agreement Name and No.		
2. Name of Operator OXY USA INC.			Contact: LESLIE REEVES E-Mail: LESLIE_REEVES@OXY.COM		
3. Address P.O. BOX 4294 HOUSTON, TX 77210			3a. Phone No. (include area code) Ph: 713-497-2492		
4. Location of Well (Report location clearly and in accordance with Federal requirements)* Sec 33 T23S R31E Mer NMP At surface NENE 276FNL 634FEL 32.267424 N Lat, 103.776257 W Lon Sec 28 T23S R31E Mer NMP At top prod interval reported below SWSE 314FSL 2111FEL 32.269070 N Lat, 103.781030 W Lon Sec 21 T23S R31E Mer NMP At total depth NWNE 28FNL 2474FEL 32.297164 N Lat, 103.780984 W Lon			8. Lease Name and Well No. IRIDIUM MDP1 28-21 FEDERAL COM 5H		
14. Date Spudded 11/02/2018			15. Date T.D. Reached 03/31/2019		
16. Date Completed <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod. 05/20/2019			9. API Well No. 30-015-45246		
18. Total Depth: MD 20571 TVD 9946			19. Plug Back T.D.: MD 20531 TVD 9946		
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) GAMMA RAY			11. Sec., T., R., M., or Block and Survey or Area Sec 33 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		
			13. State NM		
			17. Elevations (DF, KB, RT, GL)* 3403 GL		

23. Casing and Liner Record (Report all strings set in well)

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
17.500	13.375 J-55	45.5	0	573		685	165	0	
12.250	9.625 HCL-80	43.5	0	4391		1394	417	0	
8.500	7.625 HCL-80	26.4	0	9574		575	178	0	
6.750	5.500 P-110	20.0	0	20571		890	216	9000	

24. Tubing Record

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

25. Producing Intervals

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) BONE SPRING	10375	20474	10375 TO 20474	0.370	1260	ACTIVE
B)						
C)						
D)						

26. Perforation Record

27. Acid, Fracture, Treatment, Cement Squeeze, Etc.

Depth Interval	Amount and Type of Material
10375 TO 20474	15356754G SLICKWATER W/ 20052468# SAND

28. Production-- Interval A

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
05/24/2019	05/27/2019	24	→	3420.0	3474.0	9260.0			FLows FROM WELL
Choke Size	Tbg. Press. Flwg.	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
120/128	SI	830.0	→	3420	3474	9260	1016	POW	

28a. Production - Interval B

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 #481210 VERIFIED BY THE BLM WELL INFORMATION SYSTEM

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

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

Formation	Top	Bottom	Descriptions, Contents, etc.	Name	Top
					Meas. Depth
BELL CANYON	4319	5235	OIL, GAS, WATER	RUSTLER	496
CHERRY CANYON	5236	6449	OIL, GAS, WATER	SALADO	834
BRUSHY CANYON	6450	8176	OIL, GAS, WATER	CASTILE	2772
BONE SPRING	8177	9064	OIL, GAS, WATER	LAMAR	4290
1ST BONE SPRING	9065	9472	OIL, GAS, WATER	BELL CANYON	4319
2ND BONE SPRING	9473	9967	OIL, GAS, WATER	CHERRY CANYON	5236
				BRUSHY CANYON	6450
				BONE SPRING	8177

32. Additional remarks (include plugging procedure):

52. FORMATION (LOG) MARKERS CONTD.

1ST BONE SPRING 9065' MD
2ND BONE SPRING 9473' MD

Logs were mailed 8/29/19.

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 #481210 Verified by the BLM Well Information System.
For OXY USA INC., sent to the Carlsbad

Name (please print) LESLIE REEVES

Title REGULATORY ADVISOR

Signature _____ (Electronic Submission)

Date 08/29/2019

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.

**** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL ****

Additional data for transaction #481210 that would not fit on the form

32. Additional remarks, continued

Log Header, Directional Survey, As-Drilled Amended C-102 plat & WBD are attached.



Iridium MDP1 28-21 Federal Com 5H Wellbore Diagram

Elevation: GL 3403'

API: 30-015-45246

17-1/2" hole – 13-3/8" 45.5# J-55 csg
Set @ 573'

12-1/4" hole – 9-5/8" 43.5# HCL-80 csg
Set @ 4391'

8-1/2" hole – 7-5/8" 26.4# HCL-80 csg
Set @ 9574'

2-3/8" tubing @ 10410'

6-3/4" hole – 5-1/2" 20# P-110 csg
Set @ 20571'

Frac'd 10375'-20474'
50 stages

*Note: Diagram not to scale

PBTD – 20531' MD

TD – 20571' MD/9946' TVD