

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Division  
811 S. 1st Street  
Artesia, NM 88210-2834

FORM APPROVED  
OMB No. 1004-0137  
Expires July 31, 1999

c/sr

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  
☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator  
OXY USA INC. 16696

3a. Address  
P.O. BOX 50250  
MIDLAND, TX 79710-0250

3b. Phone No. (include area code)  
915-685-5717

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
990 FSL 1650 FWL SESW (N) Sec K T1B5 R29E

5. Lease Serial No.  
NM 0924

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.  
OXY Bobcat Federal #1

9. API Well No.  
30-015-30573

10. Field and Pool, or Exploratory Area  
Turkey Track Morrow, North

11. County or Parish, State  
EDDY NM

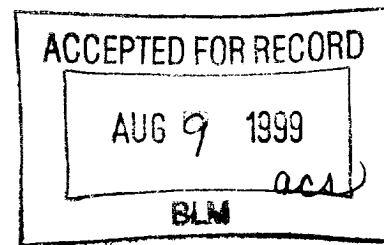
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION                                    | TYPE OF ACTION                                       |
|-------------------------------------------------------|------------------------------------------------------|
| <input type="checkbox"/> Notice of Intent             | <input type="checkbox"/> Acidize                     |
| <input checked="" type="checkbox"/> Subsequent Report | <input type="checkbox"/> Alter Casing                |
| <input type="checkbox"/> Final Abandonment Notice     | <input type="checkbox"/> Casing Repair               |
|                                                       | <input type="checkbox"/> Change Plans                |
|                                                       | <input type="checkbox"/> Convert to Injection        |
|                                                       | <input type="checkbox"/> Deepen                      |
|                                                       | <input type="checkbox"/> Fracture Treat              |
|                                                       | <input type="checkbox"/> New Construction            |
|                                                       | <input type="checkbox"/> Plug and Abandon            |
|                                                       | <input type="checkbox"/> Plug Back                   |
|                                                       | <input type="checkbox"/> Production (Start/Resume)   |
|                                                       | <input type="checkbox"/> Reclamation                 |
|                                                       | <input type="checkbox"/> Recomplete                  |
|                                                       | <input type="checkbox"/> Temporarily Abandon         |
|                                                       | <input type="checkbox"/> Water Disposal              |
|                                                       | <input type="checkbox"/> Water Shut-Off              |
|                                                       | <input type="checkbox"/> Well Integrity              |
|                                                       | <input checked="" type="checkbox"/> Other Completion |

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.)



See other side



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

Name (Printed/Typed)

DAVID STEWART

Title

REGULATORY ANALYST

Signature

*David Stewart*

Date

8/4/99

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 Office 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.

Title 18 U.S.C. Section 1001 makes 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.

Instructions on reverse

ATTACHMENT 3160-5

OXY USA INC.

OXY BOBCAT FEDERAL #1

SEC 19 T18S R29E

EDDY COUNTY, NM

MIRU PU 5/26/99, RIH & TAG @ 11155', DO CMT. TO 11180'. POOH. CHC. RIH W CBL, TOC @ 7502'. RIH W TOP GUNS (11020', BAKER LS PHR (10857'), & 2-3/8" TBG @ 10870'. CORRELATE GUNS, NDBOP, NUWH DROP BAR & PERF MORROW W 4SPF 10894-10916' & 11010-11020', TOTAL 136 HOLES, GAS TO SURFACE IN 2min. PRES BUILT TO 3350# IN 10min. Clean well to pit for 1hr. INSTALL 16/64 CHK. FLOW TEST 2hr @ 3250#, EST 4900MCFD. CHG TO 14/64, FLOW 2hr @ 3200#, EST 3600 MCFD. CHG TO 12/64, FLOW 2hr @ 3250#, EST 2700 MCFD, SION. SITP-3300#, FLOW TO PIT 5hr ON 16/64 CHK @ 3100#, EST MCFD 4600MCFD, RDPU 5/28/99. SI WOPL 5/28/99. PWOL 6/8/99 @ 4100MCFD, FTP-3200# ON 19/64 CHK AND TEST AS FOLLOWS:

| <u>HRS</u> | <u>FTP</u> | <u>GAS</u> | <u>OIL</u> | <u>WATER</u> | <u>CHOKE</u> |
|------------|------------|------------|------------|--------------|--------------|
| 24         | 2950       | 2726       | 28         | 0            | 19/64        |
| 24         | 2900       | 2755       | 29         | 0            | 10/64        |
| 24         | 3150       | 3189       | 27         | 0            | 14/64        |
| 24         | 3000       | 3097       | 33         | 0            | 14/64        |
| 24         | 3000       | 3244       | 27         | 0            | 14/64        |
| 24         | 3000       | 3262       | 28         | 0            | 14/64        |
| 24         | 3000       | 3253       | 28         | 2            | 14/64        |
| 24         | 3000       | 3242       | 26         | 0            | 14/64        |
| 24         | 2950       | 3207       | 28         | 0            | 14/64        |
| 24         | 2900       | 3189       | 35         | 0            | 14/64        |
| 24         | 2900       | 3159       | 30         | 0            | 14/64        |
| 24         | 2900       | 3124       | 22         | 0            | 14/64        |
| 24         | 2900       | 3091       | 28         | 0            | 14/64        |
| 24         | 2900       | 3122       | 25         | 0            | 14/64        |
| 24         | 2850       | 3143       | 29         | 0            | 14/64        |
| 24         | 2850       | 3084       | 27         | 0            | 14/64        |
| 24         | 2850       | 3070       | 8          | 0            | 14/64        |
| 24         | 2850       | 3075       | 11         | 0            | 14/64        |
| 24         | 2850       | 3059       | 20         | 2            | 14/64        |
| 24         | 2850       | 3029       | 20         | 2            | 14/64        |
| 24         | 2800       | 3024       | 24         | 0            | 14/64        |
| 24         | 2800       | 3015       | 20         | 0            | 14/64        |
| 24         | 2800       | 3013       | 36         | 0            | 14/64        |
| 24         | 2800       | 2988       | 21         | 0            | 14/64        |
| 24         | 2800       | 2936       | 21         | 0            | 14/64        |

7/5/99, RU PRO WELL TESTING & RUN 4-PT TEST AND CONTINUE TO TEST.

|    |      |      |    |   |       |
|----|------|------|----|---|-------|
| 24 | 2800 | 2936 | 21 | 0 | 14/64 |
| 24 | 2850 | 3052 | 8  | 0 | 14/64 |
| 24 | 2800 | 3456 | 13 | 0 | 14/64 |
| 24 | 2800 | 3481 | 39 | 0 | 14/64 |
| 24 | 2750 | 3442 | 24 | 0 | 14/64 |
| 24 | 2750 | 3470 | 20 | 0 | 14/64 |
| 24 | 2750 | 3459 | 19 | 0 | 14/64 |
| 24 | 2750 | 3443 | 22 | 0 | 14/64 |
| 24 | 2750 | 3418 | 20 | 0 | 14/64 |
| 24 | 2750 | 3408 | 21 | 0 | 14/64 |
| 24 | 2750 | 3406 | 20 | 0 | 14/64 |
| 24 | 2750 | 3467 | 39 | 0 | 14/64 |
| 24 | 2650 | 3471 | 23 | 0 | 15/64 |
| 24 | 2650 | 3462 | 20 | 0 | 15/64 |
| 24 | 2600 | 3386 | 21 | 0 | 15/64 |
| 24 | 2600 | 3367 | 21 | 0 | 15/64 |
| 24 | 2600 | 3400 | 23 | 0 | 15/64 |
| 24 | 2600 | 3407 | 20 | 0 | 15/64 |
| 24 | 2550 | 3467 | 26 | 0 | 15/64 |
| 24 | 2550 | 3452 | 23 | 0 | 15/64 |
| 24 | 2550 | 3432 | 20 | 0 | 15/64 |

NMOCD POTENTIAL TEST - 7/28/99

|    |      |      |    |   |       |
|----|------|------|----|---|-------|
| 24 | 2500 | 3425 | 32 | 0 | 16/64 |
|----|------|------|----|---|-------|

CAOF- 14008MCFD GAS GRAV-.627 API GRAV-58.5