

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0135
Expires July 31, 1996

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

Occidental Permian Limited Partnership 157984

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)

1890 FNL 2017 FWL SENW(F) Sec 26 T21S R27E

5. Lease Serial No.

NM14768A

6. If Indian, Allottee or Tribe Name

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

Baumgartner Federal Com. ^{CAS}

8. Well Name and No.

2

9. API Well No.

30-015-31775

10. Field and Pool, or Exploratory Area

Carlsbad Morrow, East

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 checked="" 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 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 <u>Well Name Change</u>
	<input type="checkbox"/> Change Plans	<input 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.)

This well was originally permitted by Myco Industries as the Phoenix Federal #1, copy of approved permit is attached.

Occidental requests that the well name be changed to the Baumgartner Federal Com. #2. ^{CAS}

This well is in the same spacing unit as the Baumgartner Federal Com. #1, 30-015-22359.

An amended C-102 plat is attached.

14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed) David Stewart

Title

Regulatory Analyst

Signature

Date

7/12/01

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, 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.

DISTRICT I

P.O. Box 1980, Hobbs, NM 88241-1980

State of New Mexico

Energy, Minerals and Natural Resources Department

Form C-102

Revised February 10, 1994

Submit to Appropriate District Office

State Lease - 4 Copies

Fee Lease - 3 Copies

DISTRICT II

P.O. Drawer DD, Artesia, NM 88211-0719

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III

1000 Rio Brazos Rd., Artec, NM 87410

DISTRICT IV

P.O. Box 2088, Santa Fe, N.M. 87504-2088

WELL LOCATION AND ACREAGE DEDICATION PLAT

XX AMENDED REPORT

API Number 30-015-31775	Pool Code 73920	Pool Name Carlsbad Morrow, East
Property Code	Property Name Baumgartner Federal Com.	Well Number 2
OGRID No. 157984	Operator Name Occidental Permian Limited Partnership	Elevation 3169'

Surface Location

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
F	26	21-S	27-E		1890	NORTH	2017	WEST	EDDY

Bottom Hole Location If Different From Surface

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County

Dedicated Acres 323.17	Joint or Infill Y	Consolidation Code	Order No.
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NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

	OPERATOR CERTIFICATION I hereby certify the the information contained herein is true and complete to the best of my knowledge and belief. Signature: <u>A.N. Mummy, PLS</u> Printed Name: <u>A.N. Mummy</u> Title: <u>OPER-ENGR MGR</u> Date: <u>5/27/01</u>	
	SURVEYOR CERTIFICATION I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision and that the same is true and correct to the best of my belief. Date Surveyed: <u>JANUARY 30, 2001</u> Signature & Seal of Professional Surveyor: <u>Ronald J. Eidson</u> 5/27/01 01-11-0003	
	Certificate No. <u>RONALD J. EIDSON 3239</u> <u>GARY EIDSON 12841</u>	

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OPERATOR'S COPY

FORM APPROVED
OMB No. 1004-0135
Expires July 31, 1996

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☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator
Occidental Permian Limited Partnership 157984

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)
1890 FNL 2017 FWL SENW(F) Sec 26 T21S R27E

5. Lease Serial No.
NM14768A

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.
Phoenix Federal Com #1

9. API Well No.
30-015-

10. Field and Pool, or Exploratory Area
Carlsbad Morrow, East

11. County or Parish, State
Eddy NM

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

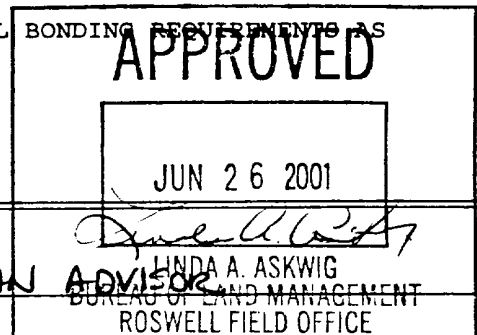
TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> 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 <u>Change of Operator</u>
	<input type="checkbox"/> Change Plans	<input 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.)

AS REQUIRED BY 43 CFR 3100.0-5(a) AND 43 CFR 3162.3, WE ARE NOTIFYING YOU OF A CHANGE OF OPERATOR ON THE ABOVE REFERENCED LEASE.

OCCIDENTAL PERMIAN LIMITED PARTNERSHIP AS NEW OPERATOR ACCEPTS ALL APPLICABLE TERMS, CONDITIONS, STIPULATIONS AND RESTRICTIONS CONCERNING OPERATIONS CONDUCTED ON THE LEASE OR PORTION OF LEASE DESCRIBED.

OCCIDENTAL PERMIAN LIMITED PARTNERSHIP MEETS FEDERAL BONDING REQUIREMENTS AS FOLLOWS (43 CFR 3104):
STATEWIDE OIL & GAS BOND NO. 929128583



14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

LESLYN WALLACE

Title

LANDMAN ADVISOR

Date

6/4/01

Signature
Leslyn Wallace

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, 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)

ATTACHED

OPERATOR'S COPY

Form 3160-3
(August 1999)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

APPLICATION FOR PERMIT TO DRILL OR REENTER

OMB No. 1004-0136
Expires November 30, 2000

1a. Type of Work: <input checked="" type="checkbox"/> DRILL <input type="checkbox"/> REENTER		5. Lease Serial No. NM-14768A
b. Type of Well: <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/> Single Zone <input type="checkbox"/> Multiple Zone		6. If Indian, Allottee or Tribe Name Not Applicable
2. Name of Operator Myco Industries, Inc.		7. If Unit or CA Agreement, Name and No. Not Applicable
3A. Address P.O. Box 840 Artesia, New Mexico 88210		8. Lease Name and Well No. 2805 PHOENIX FEDERAL COM #1
3b. Phone No. (include area code) (505) 746-0246		9. API Well No. 30-015-31775
4. Location of Well (Report location clearly and in accordance with any State requirements.)* At surface 1870' 1980' FNL & 2017' 2017' FWL per section 15A note At proposed prod. Zone 1880' FNL & 2024' FWL		10. Field and Pool, or Exploratory Carlsbad Morrow, East
14. Distance in miles and direction from nearest town or post office* Inside Carlsbad city limits		11. Sec., T., R., M., or Blk. and Survey or Ar Section 26, T21S-R27E NMPM
15. Distance from proposed* location to nearest property or lease line, ft. (Also to nearest drig. unit line, if any) 623' 646'	16. No. of Acres in lease 320-acres	12. County or Parish Eddy
18. Distance from proposed* location to nearest well, drilling, completed, applied for, on this lease, ft. 2000'	19. Proposed Depth 12,100'	13. State New Mex
20. BLM/BIA Bond No. on file Nationwide Bond #NM-58 59 71	21. Elevations (Show whether DF, KDB, RT, GL, etc.) 3169' GR	
22. Approximate date work will start* May 1, 2001		23. Estimated duration 35 Days
24. Attachments Carlsbad Controlled Water Basin		

The following, completed in accordance with the requirements of Onshore Oil and Gas Order No. 1, shall be attached to this form:

- | | |
|--|--|
| 1. Well plat certified by a registered surveyor.
2. A Drilling Plan.
3. A Surface Use Plan (if the location is on National Forest System Lands, the SUPO shall be filed with the appropriate Forest Service Office). | 4. Bond to cover the operations unless covered by an existing bond on file (see Item 20 above).
5. Operator certification.
6. Such other site specific information and/or plans as may be required by the authorized office. |
|--|--|

25. Signature N. A. Muncy, PELS	Name (Printed/Typed) Nelson A. Muncy	Date 3/30/2001
Title: Operations and Engineer Manager		
Approved by (Signature) Mary J. Russell	Name (Printed/Typed) Mary J. Russell	Date 5/9/01
Title FIELD MANAGER		
CARLSBAD FIELD OFFICE		

Application approval 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.

Conditions of approval, if any, are attached.

APPROVAL FOR 1 YE.

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.

*(Instructions on reverse)

**APPROVAL SUBJECT TO
GENERAL REQUIREMENTS AND
SPECIAL STIPULATIONS
ATTACHED**