

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OCD Artesia  
**RECEIVED**  
JUL 23 2013  
NMOCD 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.*

5. Lease Serial No.  
NMLC048479A

6. If Indian, Allottee or Tribe Name

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

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

1. Type of Well  
 Oil Well  Gas Well  Other

8. Well Name and No.  
CHRIS ROBIN 20 FEDERAL 8

2. Name of Operator  
OXY USA WTP LP  
Contact: JENNIFER A DUARTE  
E-Mail: jennifer\_duarte@oxy.com

9. API Well No.  
30-015-40673

3a. Address  
PO BOX 4294  
HOUSTON, TX 77210

3b. Phone No. (include area code)  
Ph: 713-513-6640

10. Field and Pool, or Exploratory  
ARTESIA; GLORIETA-YESO

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
Sec 20 T17S R28E NWNE 402FNL 2183FEL

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 Drilling Operations
	<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 recomplete 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 recompletion 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.)

AYFU #10 (Chris Robin 20 Fed #8)  
01/11/2013 ? SPUD 11? SURFACE HOLE. LOST CIRCULATION. WIDEN HOLE TO 14.75?  
01/12/2013 ? TD 14/75? HOLE @ 370?. RAN 11.75? CASING. CEMENTED WITH 490 SX 1.67 YLD. NO CIRCULATION, NO CEMENT TO SURFACE. TAG W/ 1? @ 195?; PUMPED 25 SX, NO CEMENT TO SURFACE.  
01/13/2013 ? PUMPED 100 ADDITIONAL SX. CIRCULATED 8.4 SX TO SURFACE.  
01/14/2013 ? DRILLED 11? HOLE TO 478?. CEMENTED WITH 200 SX 1.34 YLD; CIRCULATED 83 SX TRO SUREFACE. TOC = 0?  
01/15/2013 ? TEST CASING @ 2065PSI ? 30 MINUTES ? GOOD TEST. BEGAN DRILLING 7.875? PRODUCTION HOLE FROM 488?  
01/18/2013 ? TD WELL @ 4880?  
01/19/2013 ? RAND TRIPLE COMBO LOGS. RAN 5.5? CASING. CEMENTED WITH 980 SX 1.89 YLD. CIRCULATED 214 SX TO SURFACE. TOC = 0?. RELEASED RIG.

*Accepted for record*  
*JWade NMOCD July 23/13*

14. I hereby certify that the foregoing is true and correct.  
**Electronic Submission #211303 verified by the BLM Well Information System For OXY USA WTP LP, sent to the Carlsbad Committed to AFMSS for processing by KURT SIMMONS on 07/02/2013 ()**  
Name (Printed/Typed) JENNIFER A DUARTE Title REGULATORY SPECIALIST

Signature (Electronic Submission) Date 06/20/2013

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

**ACCEPTED FOR RECORD**

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 \_\_\_\_\_

JUL 16 2013

*[Signature]*

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.

BUREAU OF LAND MANAGEMENT  
CARLSBAD FIELD OFFICE

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

*JW*