1. Type of Well       Gas Wellt       Other       8. Well Name and No.         2. Name of Operator       OXY USA Inc.       16696       9. API Well No.         3a. Address       3b. Phone No. (include area code)       3b. Phone No. (include area code)       3b. Phone No. (include area code)         P.O. Box 50250       Midland, TX 79710       432-685-5717       10. Field and Pool, or Exploratory Area					
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TYPE OF SUBMISSION       TYPE OF ACTION         Image: Subsequent Report       Acidizz       Deepen       Production (Stat/Resume)       Water Stat-Off         Subsequent Report       Centrg Repair       New Construction       Recomplete       Other         Final Abandonment Notice       Convert to Injection       Plag and Abandon       Temporatily Abandon       Otherparatily Abandon         13. Describe Proposed or Complete Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration the iffu proposal is to deepen dimensionality, give abandace locations and measured and three worked deptins of all pertinent markers and so of the involved operations. If the operation results in a shiftight/emotypic/lisin or recompletion in a new interval, a Form 3160-4 shall be filed only after all requirements, including reclamation, have been completed, and the operator the determined that the site is ready for fluid inspection.)         SEE ATTACHED       SEE ATTACHED FOR CONDITIONS OF APPROVAL         14. Thereby certify that the foregoing is true and correct Name (Printed/Typed)       Date       State         Minoc D ARTESIA       Date       State       State         14. Thereby certify that the foregoing is true and correct Name (Printed/Typed)       Date       State         Mode Correction is strue and correct Name (Printed/Typed)       Date       State       State         Mand the borgeoing is true and correct Name (Printed/Typed)       Date	B-1981 FSL 363	SFEL NESE(I)			Eddy NM
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Notice of lutent   Subsequent Report Casing Repair   Final Abandonment Notice Casing Repair   Prog and Abandon Temponnity Abandon   The proposed or Completed Operation (clearly state all partinent densits, including estimated stating date of any proposed work and approximate duration the following completion of the involved operations (clearly state all partinent densits, including estimated stating date of any proposed work and approximate duration the following completion of the involved operations. If the operation such the state of any proposed work and approximate duration the following completion of the involved operations. If the operation results in a utility of such the state of any proposed work and approximate duration the following completion of the involved operations. If the operation results in a utility of such the state of any proposed work and approximate duration the following completion of the involved operations. If the operation results in a utility of such the state of any proposed work and approximate duration the following completion of the involved operations. If the operation results in a utility of such the state of any proposed work and approximate duration the testing has been completed. Final Abandonment Notices shall be find only after all requirements, including reclamation, have been completed, and the operator he determined that the site is ready for final inspection.)   Image: the proposed is the and correct Name (PrintedTyped)   Jul 2 5 2013   Jul 2 5 2013 <t< td=""><td>TYPE OF SUBMISSION</td><td colspan="3">SUBMISSION TYPE OF ACTION</td><td></td></t<>	TYPE OF SUBMISSION	SUBMISSION TYPE OF ACTION			
□ bioloculation (bioloculation (c) = 0 (ange Plans Convert to Injection       □ Plag and Abandon       □ Temporarily Abandon         □ Final Abandonment Notice       □ Convert to Injection       □ Plag Back       □ Water Disposal         13. Describe Proposed or Completed Operation (clearly state all pertionent detrails, including estimated stating date of any proposed-worke and approximate duration the Hthe proposal is to depend indeximally of we subservation for the work will be performed or provide the Dond No. on file with BLM/BIA. Required subsequent reports shall be filed or testing luss been completed. Filed on testing luss been completed. Filed on testing luss been completed. Filed on testing luss been completed, and the operator has been completed, and the operator has been completed. This Abandon         JUL 2 5 2013       SUBJECT TO LIKE APPROVAL BY STATE       SEE ATTACHED FOR CONDITIONS OF APPROVAL         14. Ihereby certify that the foregoing is true and correct Nature (Printeel/Type)       SUBJECT TO LIKE APPROVAL BY STATE       Title Regulatory Advisor         14. Ihereby certify that the foregoing is true and correct Nature (Printeel/Type)       Date       \$103 { 123         14. Ihereby certify that the foregoing is true and correct Nature (Printeel/Type)       Date       \$104 { 316} { 123         14. Ihereby certify that the foregoing is true and correct Nature (Printeel/Type)       Date       \$104 { 123         14. Ihereby certify that the foregoing is true and correct Nature (Printeel/Type)       Date       \$105 { 123         15. SPACE FOR FEDERAL OR STATE OFFICE PPROVED A	<b></b>	Alter Casing	Fracture Treat	Reclamation	Well Integrity
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Name (Printed/Typed)       Title Regulatory Advisor         David Stewart       Date         Signature       THIS SPACE FOR FEDERAL OR STATE         OFFICE       Date         July       July         Signature       Office	JUL ${f 2}$	5 2013 ARTESIA SUBJEC	T TO LIKE		SEE ATTACHED FOR
THIS SPACE FOR FEDERAL OR STATE OFFICE PROVED         /s/ Jerry Blakley       Title       Date         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.       JUL 2 3 2013	Name (Printed/Typed)		Title	Regulatory Advisor	
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.	Signature	al		5/3/13	,
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.       JUL 2 3 2013		THIS SPACE FOR	FEDERAL OR	STATE OFFIC	PDDU/CD
which would entitle the applicant to conduct operations thereon.	Approved by /s/ Jer	rry Blakley			
Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly an BUREAU oppression and the statements or representations as to any matter within its jurisdiction. CARI SBAD FIELD OFFICE	certify that the applicant holds leg	re attached Approval of this notice	de au un et avanta at at		
	······································	gal or equitable title to those rights		Office:	

(Instructions on page 2)

"Goodnight 27 Federal #24 30-015-36137

## WATER DISPOSAL ONSHORE ORDER #7

The following information is needed before your method of water disposal can be considered for approval.

- 1. Name(s) of formation (s) producing water on the lease.
- 2. Amount of water produced from each formation in barrels per day. SR BPO
- 3. How water is stored on the lease. 2-500bbl. FG Water Tanks
- 4. How water is moved to disposal facility. Transfer Pump through 6' buried polyline
- 5. Operator's of disposal facility OXY USIA Inc.
  - a. Lease name or well name and number Hanvour 15 #3

b. Location by ¼¼ Section, Township, and Range of the disposal system

## SENE Sec 15 TZ4S FZ9E

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c. The appropriate NMOCD permit number 5w0 - 1326

Submit on Federal Sundry 3160 to Carlsbad Field Office 620 E Greene Street Carlsbad NM88210.

## BUREAU OF LAND MANAGEMENT Carlsbad Field Office 620 East Greene Street Carlsbad, New Mexico 88220 575-234-5972

## Disposal of Produced Water From Federal Wells Conditions of Approval

Approval of the produced water disposal methodology is subject to the following conditions of approval:

- 1. This agency shall be notified of any change in your method or location of disposal.
- 2. Compliance with all provisions of Onshore Order No. 7.
- 3. This agency shall be notified of any spill or discharge as required by NTL-3A.
- 4. This agency reserves the right to modify or rescind approval whenever it determines continued use of the approved method may adversely affect the surface or subsurface environments.
- 5. All above ground structures on the lease shall be painted Shale Green (5Y 4/2), or as per approved APD stipulations. This is to be done within 90 days, if you have not already done so.
- 6. Any on-lease open top storage tanks shall be covered with a protective cover to prevent entry by birds and other wildlife.
- 7. This approval should not constitute the granting of any right-of-way or construction rights not granted by the lease instrument.
- 8. If water is transported via a pipeline that extends beyond the lease boundary, then you need to submit within 30 days an application for right-of-way approval to the Realty Section in this office if you have not already done so.
- 9. This **approval is for produced water disposal only** and any hydrocarbons removed from lease by this method will be subject to royalty payment as well as other enforcement actions as necessary.
- 10. Disposal at any other site will require prior approval.
- 11. Subject to like approval by NMOCD.

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