

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
OCD ArtesiaFORM APPROVED
OMB No. 1004-0137
Expires: October 31, 2014**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.

NWNM B6024

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2.

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

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

8. Well Name and No.

Cypress 33 Federal Com. #66t

2. Name of Operator

OXY USA Inc.

16696

9. API Well No.

30-015-41557

3a. Address

P.O. Box 50250
Midland, TX 79710

3b. Phone No. (include area code)

432-685-5717

10. Field and Pool or Exploratory Area

Cedar Canyon Bone Springs

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

466 FNL 1040 FEL NENE (A) Sec 33 T23S R29E

11. County or Parish, State

Eddy NM

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

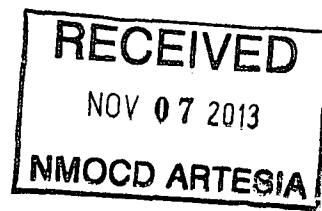
TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> 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>Move Flare Pit</u>
	<input checked="" 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 must 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 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.)

OXY USA Inc. respectfully requests to move the flare pit as indicated on the attached wellsite layout.

Received verbal approval 10/4/13.

Accepted for record
NMOCD ^{10/5} 10/7/2013



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

David Stewart

Title Sr. Regulatory Advisor

david_stewart@oxy.com

Signature

Date

10/7/13

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

/s/ STEPHEN J. CAFFEY

Title

FIELD MANAGER

Date

NOV - 4 2013

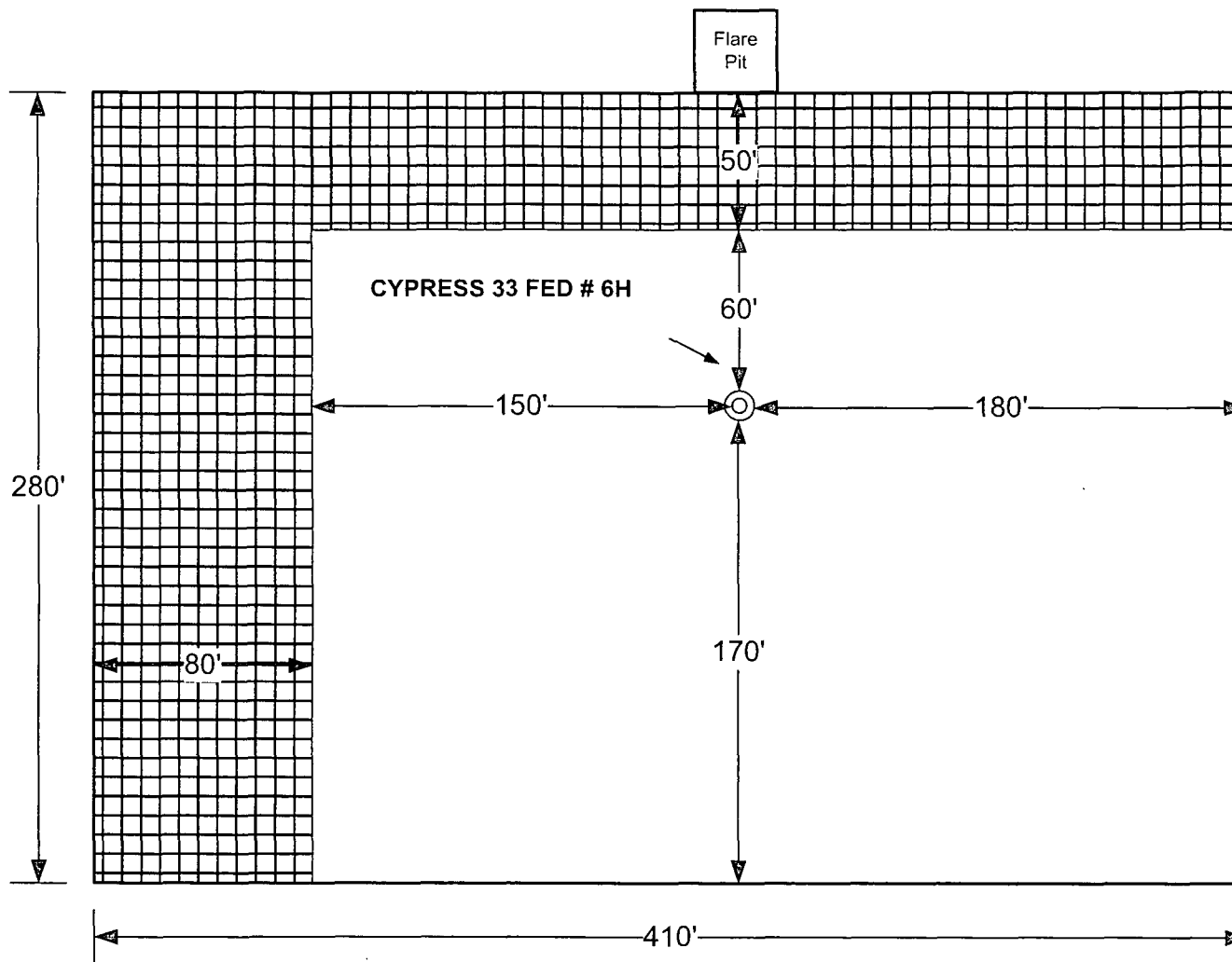
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

CARLSBAD FIELD OFFICE

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 page 2)



8' Diameter x 8' Deep Tinhorn
Cellar

FLEX 3 & ENSIGN RIG DIAGRAM
CYPRESS 33 FED # 6H

EDDY COUNTY, NEW MEXICO

REVISION BLOCK

NO.	DATE	DESCRIPTION	BY	CHK	APP

ENGINEERING RECORD

BY	DATE

Awarded Well Site Layout