

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMMN19848
2. Name of Operator OXY USA INCORPORATED		6. If Indian, Allottee or Tribe Name
3a. Address 5 GREENWAY PLAZA STE 110 HOUSTON, TX 77046-0521		7. If Unit or CA/Agreement, Name and/or No.
3b. Phone No. (include area code) Ph: 432.685.5717		8. Well Name and No. CYPRESS 33 FEDERAL COM 7H
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 33 T23S R29E NENW 0150FNL 1900FWL 32.268056 N Lat, 103.991766 W Lon		9. API Well No. 30-015-42616-00-X1
		10. Field and Pool, or Exploratory CEDAR CANYON
		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
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Drilling Operations
	<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.)

9/13/14 Drill 10-5/8" hole to 2935' 9/14/14. RIH & set 8-5/8" 32# J-55 BTC csg @ 2935'. Pump 20BFW spacer w/ red dye, then cmt w/ 650sx (202bbl) PPC w/ additives 12.9ppg 1.75 yield followed by 300sx (71bbl) PPC w/ additives 14.8ppg 1.33 yield, circ 353sx (110bbl) cmt to surface, WOC. Install pack off mandrell, test to 5000#, tested good. 9/16/14, RIH & tag cmt @ 2856', test csg to 2750# for 30 min, test passed. Drill new formation to 2945', perform FIT test to EMW=12.4ppg, 488psi good test.

9/16/14 Drill 7-7/8" hole to 13541'M 8740'V, 9/25/14. RIH & set 5-1/2" 17# L-80 TXP csg @ 13536'. Pump 50bbl FW spacer then cmt w/ 660sx (404bbl) PPC w/ additives @ 10.0ppg 3.43 yield followed by 830sx (244bbl) PPH w/ additives @ 13.2ppg 1.65 yield, circ 150sx (92bbl) cmt to surface. ND BOP, install wellhead, test to 5000# for 15min; tested good. RD Rel Rig 9/28/14.

NM OIL CONSERVATION
ARTESIA DISTRICT

APR 06 2015

Accepted for record

LSD NMOC 4/27/15

RECEIVED

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

Electronic Submission #267679 verified by the BLM Well Information System
For OXY USA INCORPORATED, sent to the Carlsbad
Committed to AFMSS for processing by DEBORAH HAM on 03/31/2015 (15DDM#06725B)

Name (Printed/Typed) DAVID STEWART

Title REGULATORY ADVISOR

Signature (Electronic Submission)

Date 10/02/2014

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By

Title

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 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.

**** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ****