Form 3160-5 (August 2007)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT OCD Artesia

FORM APPROVED
OMB NO. 1004-0135
Expires: July 31, 2016

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to re-enter an

5. Lease Serial No. NMNM0281482A 6. If Indian, Allottee or Tribe Name

abandoned well. Use form 3160-3 (APD) for such proposals.						Tribe riame		
SUBMIT IN TRIPLICATE - Other instructions on reverse side.					7. If Unit or CA/Agreement, Name and/or No.			
1. Type of Well ☐ Gas Well ☐ Other					8. Well Name and No. MOBIL FEDERAL 2			
Name of Operator OXY USA INCORPORATED	IOLA m		9. API Well No. 30-015-37335					
3a. Address P.O. BOX 50250 MIDLAND, TX 79710	(include area code) 5-5936 -5688)	10. Field and Pool, or Exploratory SAND DUNES DELAWARE, WEST					
4. Location of Well (Footage, Sec., T.			·11. County or Parish, a	nd State				
Sec 29 T23S R31E SENE 172		EDDY COUNTY	, NM					
12. CHECK APPR	ROPRIATE BOX(ES) TO	INDICATE	NATURE OF I	NOTICE, R	EPORT, OR OTHER	RDATA		
TYPE OF SUBMISSION	TYPE OF ACTION							
☐ Notice of Intent	☐ Acidize ☐ Do		eepen Produc		ion (Start/Resume)		Off :	
_	☐ Alter Casing	☐ Frac	re Treat		ation	■ Well Integrit	i y	
Subsequent Report ■	nt Report		v Construction 🔀 Recomp		plete	Other		
☐ Final Abandonment Notice	☐ Change Plans ☐ Plug		and Abandon	□ Tempor	rarily Abandon			
	☐ Convert to Injection ☐ Plug		Back	· □ Water I	Disposal ·	·		
following completion of the involved testing has been completed. Final Abdetermined that the site is ready for final PU 2/18/12, POOH rods & min, good test. RIH & perf @	file with BLM/BIA. Required subsequent reports shall be filed within 30 days completion or recompletion in a new interval, a Form 3160-4 shall be filed once equirements, including reclamation, have been completed, and the operator has 38', pressure test csg to 4650# for 30 Frac in 2 stages w/ 3000g 7.5% 21 W/2411# sand, RD Halliburton. RIH & 7110'. RIH w/ 1-1/2" X 26' rod NM OIL CONSERVATION ARTESIA DISTRICT AUG 11 2015							
					RECEIVED			
14. I hereby certify that the foregoing is true and correct. Electronic Submission #301545 verified by the BLM Well Information System For OXY USA INCORPORATED, sent to the Carlsbad Committed to AFMSS for processing by DEBORAH HAM on 06/15/29 CCEPTED FOR RECORD								
Name(Printed/Typed) DAVID S	I EWART		Title SR. RE	GULATOR'	ADVISOR			
Signature (Electronic S	Submission)		Date 05/13/2	015	AHG ,	6, 2015		
	THIS SPACE FOR	R FEDERA	L OR STATE	OFFICE U		m		
Approved By			Title		CARLSBAD F	IELD OFFICE Date		
Conditions of approval, if any, are attache certify that the applicant holds legal or equivalent would entitle the applicant to condu	Office							
Title 18 U.S.C. Section 1001 and Title 43 States any false, fictitious or fraudulent s	U.S.C. Section 1212, make it a createments or representations as to	rime for any pe o any matter wi	rson knowingly and thin its jurisdiction.	l willfully to m	ake to any department or	agency of the Unite	d	