

**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.*

RECEIVED

5. Lease Serial No.  
NMNM26870

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.  
HNG 35 FEDERAL 1

9. API Well No.  
30-015-25280

10. Field and Pool, or Exploratory  
COTTONWOOD DRAW DELAWARE

11. County or Parish, and State  
EDDY COUNTY, NM

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

1. Type of Well  
 Oil Well  Gas Well  Other

2. Name of Operator  
OXY USA INC. Contact: DAVID STEWART  
E-Mail: david\_stewart@oxy.com

3a. Address  
P.O. BOX 50250  
MIDLAND, TX 79710

3b. Phone No. (include area code)  
Ph: 432-685-5717  
Fx: 432-685-5742

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
Sec 35 T25S R26E SESE 660FSL 660FEL  
32.080840 N Lat, 104.257270 W Lon

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 type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input checked="" 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 recomple 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 recomple 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.)

8/10/2015 MIRU PU

8/11/2015 ND WH, NU BOP, POOH w/ tbg

8/12/2015 RIH & tag up @ 5350', POOH. RIH & set CIBP @ 5350', M&P 10# MLF, RIH & dump bail 3sx CI C cmt on top, POOH. RIH & set CIBP @ 4708', POOH. RIH w/ tbg & tag @ CIBP @ 4708'.

8/13/2015 Circ hole w/ 10# MLF, M&P 25sx CL C cmt. PUH to 2875', M&P 25sx CL C cmt, PUH, WOC.

8/14/2015 RIH & tag cmt @ 2508', PUH to 1935', M&P 25sx CL C cmt, PUH, WOC. RIH & tag cmt @ 1690', POOH. RIH & perf @ 1165', EIR, M&P 35sx CI C cmt, PUH, WOC. RIH & tag cmt @ 1055', POOH. RIH & perf @ 300', EIR, M&P 165sx CI C cmt, circ to surf. ND BOP, top off csg, RDP.

Accepted for record  
OED NMOCD 9/15/15

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

Electronic Submission #315789 verified by the BLM Well Information System  
For OXY USA INC., sent to the Carlsbad

Name (Printed/Typed) DAVID STEWART Title SR. REGULATORY ADVISOR

Signature *David Stewart* (Electronic Submission) Date 09/08/2015

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

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 \_\_\_\_\_

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.

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