S Oil Well Gas Well Other FEDERAL 23 11H	Form 3160-5 (August 2007) DE	UNITED STATES	S NTERIOR		 		APPROV 0. 1004-0	135	
abandoned well. Use form 346-3 (APD) for such proposals.     Or in adual, invalued is three value     SUBMIT IN TRIPLICATE - Other instructions on reverse side.     If type of Well     Got Well	BINDDY	UREAU OF LAND MANA		arisdao	l rieid	5. Ecase Scinii Ro.	July 51, 2	010	
Commit In Yurk ELARTE Come in the Larter Come	Do not use thi abandoned we	is form for proposals to II. Use form 3160-3 (API	drill or to re- D) for such p	enter GCL roposals.	) Artes	6. If Indian, Allottee	or Tribe Na	ame	
Book Well         Case Well         PEDERAL 23 1114           2. None of Operation         Consuct         JENNIFER A DUARTE         9, API Well No. 30-015-3947-00-51           3. Address         Consuct         JENNIFER A DUARTE         9, API Well No. 30-015-3947-00-51           3. Address         Consuct         JENNIFER No. (stabulat ana code)         10. Endiand Pool, ce Exploratory. LIVINGSTON RIDGE DELAWARE           4. Location of Well         (Fronzege Sec. T. R. M. or Survey Decreption)         11. Casaly or Parial, and State           5. Sec. 26 T22S R31E NNNW 590FNL 380FWL         EDDY COUNTY, NM           12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA           TYPE OF SUBMISSION         TYPE OF ACTION           II. Casaly or Parial, and State         EDDY COUNTY, NM           Subsequent Report         Acidize         December           Ching Repair         New Construction         Reclamation         Well Integriny           Subsequent Report         Chings Repair         Prescuesting the of the stable o	SUBMIT IN TRIPLICATE - Other instructions on reverse side.					7. If Unit or CA/Agreement, Name and/or No.			
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5 GREENWAY PLAZA STE 110       Ph: 713-513-6640       LIVINGSTON RIDGE DÉLAWARE         1 Location of Well       (Prenage, Sec. T. R. M. or Survey Description)       11. County or Parsh, and State         Sec 26 722S R31E NWINW 590FNL 380FWL       EDDY COUNTY, NM         12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA         TYPE OF SUBMISSION       TYPE OF ACTION         I Notice of Intent       Acidize       Deepen         Subsequent Report       Chaing Repair       New Construction       Reclamation         I The proved is of open directionally for exomplete formating them is, including estimated starting data of any proposed workal approximate duration thereof.       Onshore Order Varia centre and the operating centre and the operating centre and the operating them is new increased and meanered and meaneremeanered meaneremane completion of a second theoremeanereset te	2. Name of Operator	DUARTE							
	5 GREENWAY PLAZA STE 110 Ph: 713-513-6				:)				
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA         TYPE OF SUBMISSION         TYPE OF SUBMISSION         Over the construction         Subsequent Report       Casing Repair       Preve Construction       Reclamation       Will Integrity         Subsequent Report       Casing Repair       Preve Construction       Reclamation       Will Integrity         13. Descente Proposed or Completed Operation (clearly state all pertition mathematics and anose within 30 days of 00 pertition mathematics and conserved in the float under which the work will be performed or provide the Bond No. on file with #LM/#LA. Required subsectual reports shall be filed within 30 days of blowing completed Operation (clearly state all pertition mathematics and anose within 30 days of blowing completed operations. The operation results is a multiple completion or recompletion and new within 40 days of blowing completion or recompletion or recompletion and new within 40 days of blowing completion or recompletion or recompletion or recompletion and period period on the shall be filed with 41 days of the state is a scale for final inspection.)         OXY USA INC requests permission to install a Vapor Combustor Unit (VCU) at FOXGLOVE 29 FEDERAL Tank         Battery. This request is due to be fact that the cost of on installing and operating equipment necessary to capture the gas exceeds the value of the state and the vertical days of blowing completed on the state and the vertical days of the state and the value of the state and the vertical days of the state and the cost of on installing and operating equipment and the vertical days of the state and the		11. County or Parish, and State							
TYPE OF SUBMISSION       TYPE OF ACTION         If Notice of Intent       Acidize       Deepen       Production (Start/Resume)       Water Shut-Off         Subsequent Report       Casing Repair       New Construction       Recomplete       Onshore Order Varia         Casing Repair       New Construction       Recomplete       Onshore Order Varia         Casing Repair       Plug and Abandon       Temporarily Abandon       Onshore Order Varia         Casing Repair       Plug and Abandon       Temporarily Abandon       Onshore Order Varia         Casing Repair       Plug and Abandon       Temporarily Abandon       Onshore Order Varia         Convert to Injection       Plug Back       Water Disposal       Onshore Order Varia         Convert to Injection       Plug Back       Water Disposal       Onshore Order Varia         Colored Completed Operation (Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof.       Inthe proposal of the prodition of the approximate duration thereof.         Other Completed Proposed or Completed Operation (Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof.       Inthereof.         Other Completion of the synth final support final to specify final state of any final support final to specify final state of any proposed work and the aperotempletion of the synth final supperior. </td <td>Sec 26 T22S R31E NWNW 59</td> <td></td> <td colspan="3">EDDY COUNTY, NM</td>	Sec 26 T22S R31E NWNW 59		EDDY COUNTY, NM						
A circlize     Acidize     Acidi     Acidize     Acidize     Acidize     Acidize     Acidize	12. CHECK APPI	ROPRIATE BOX(ES) TO	) INDICATE	NATURE OF	NOTICE, RE	PORT, OR OTHE	R DATA	A	
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Subsequent Report     Casing Repair     Cas	Notice of Intent	Acidize	Deepen Production (Start/Resume		on (Start/Resume)	🗆 Wa	ter Shut-Off		
Change Plans     Plug and Abandon     Recomprise     Change Plans     Plug and Abandon     Temporarily Abandon     Convert to Injection     Plug and Abandon     Temporarily Abandon     Convert to Injection     Plug and Abandon     Temporarily Abandon     Convert to Injection     Plug Back     Water Disposal     Convert to Injection     Convert to Injection     Convert to Injection     Plug Back     Water Disposal     Convert to Injection     Convert the Mathematic Inference     Convert the Mathematic Inference     Convert the Mathematic Inference     Convert the Mathematic Inference     Convert the Save the Save the Inference     Convert the Save the Save the Inference     Convert the Save the Save the Save the Inference     Convert the Save the Inference     Convert the Save the Save the Sav	X Notice of Intent	Alter Casing	🗖 Frac	ture Treat	🗖 Reclamat	Reclamation		II Integrity	
Prinal Abandonment Notice Change Plans Plug Back Change Plans Plug Back Change Plans Covert to Injection Covert to Injection Plug Back Change Plans Covert to Injection Covert to Injection Plug Back Change Plans Covert to Injection Covert to	Subsequent Report	Casing Repair	🗖 New	Construction	onstruction				
Convert to Injection Convert	Final Abandonment Notice	🗂 Change Plans	🗖 Plug	and Abandon	Temporarily Abandon			ore Order Varian	
If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical deptils 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/BLA. Required subsequent percorts shall be filed on 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 Abandonnem 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.) OXY USA INC requests permission to install a Vapor Combustor Unit (VCU) at FOXGLOVE 29 FEDERAL Tank Battery. This request is due to the fact that the cost of installing and operating equipment necessary to capture the gas exceeds the value of the gas over the life of the facility. OXY USA INC may be required to provide economic justification and provide volume verification to has the following conditions apply: 1. OXY USA INC may be required to provide economic justification and provide volume verification to heatthorized Officer upon request. 2. OXY USA INC will comply with NTL-4A requirements. 3. If volume being combusted is bar 50 MCF of gas per day, it is considered 7unavoidably lost? production shall mean (1) those gas vapors which are released (in this case combusted) from low-pressure storage tanks. 4. Essentially all measured combusted volumes over 50 MCF will require payment of royalties and the reported. 5. Name(Printed/Typed) JENNIFER A DUARTE 14. I hereby certify that the foregoing is rue and correct. Electronic Submission #322960 verified by the BLM Well Information System For OXY USA INCORPORTEE, sent to the Carisbad Committed to AFMS for processing by JENNIFER SANCHEZ on 11/122015 (16JAS1083SE). Name(Printed/Typed) JENNIFER A DUARTE 11/09/2015 11/09/2015 11/09/2015 11/09/2015 11/09/2015 11/09/2015		Convert to Injection	🗖 Plug	Back	🗖 Water Di	U Water Disposal			
4. Essentially all measured combusted volumes over 50 MCF will require payment of royalties and     14. I hereby certify that the foregoing is true and correct.     Electronic Submission #322960 verified by the BLM Well Information System     For OXY USA INCORPORATED, sent to the Carlsbad     Committed to AFMSS for processing by JENNIFER SANCHEZ on 11/12/2015 (16JAS1083SE)     Name (Printed/Typed) JENNIFER A DUARTE     Signature (Electronic Submission)     Date 11/09/2015     THIS SPACE FOR FEDERAL OR STATE OFFICE USE     Approved By_DUNCAN WHITLOCK     Title TECHNICAL LPET     Date 01/04/201     Onditions of approval, if any, are attached. Approval of this notice does not warrant or     rity that the applicant to conduct operations thereon.     Office Carlsbad     Office Carlsbad	testing has been completed. Final At determined that the site is ready for fi OXY USA INC requests permi Battery. This request is due to necessary to capture the gas INC understands that the follo 1. OXY USA INC may be requ the Authorized Officer upon re 2. OXY USA INC will comply w 3. If volume being combusted lost?, therefore, no royalty obl a. ?Unavoidably Lost? produc	pandonment Notices shall be file inal inspection.) ission to install a Vapor C to the fact that the cost of i exceeds the value of the g wing conditions apply: uired to provide economic equest. with NTL-4A requirements is less than 50 MCF of ga igation shall be accrued a tion shall mean (1) those	ed only after all r ombustor Uni installing and gas over the f justification a s. as per day, it i and will not be	equirements, incluents t (VCU) at FOX operating equip fe of the facility nd provide volu s considered ?( required to be	ding reclamation, GLOVE 29 FE oment COXY USA Ime verification unavoidably reported.	have been completed, EDERAL Tank n to <b>NM OIL C</b> ARTE JAI	and the op CONSE SIA DIST	RVATION TRICT	
Electronic Submission #322960 verified by the BLM Well Information System For OXY USA INCORPORATED, sent to the Carlsbad Committed to AFMSS for processing by JENNIFER SANCHEZ on 11/12/2015 (16JAS1083SE)         Name (Printed/Typed)       JENNIFER A DUARTE       Title       REGULATORY SPECIALIST         Signature       (Electronic Submission)       Date       11/09/2015         THIS SPACE FOR FEDERAL OR STATE OFFICE USE         Approved By_DUNCAN WHITLOCK_         Title TECHNICAL LPET         Date 01/04/201         onditions of approval, if any, are attached. Approval of this notice does not warrant or rrify that the applicant holds legal or equitable title to those rights in the subject lease hich would entitle the applicant to conduct operations thereon.       Office Carlsbad         Office Carlsbad	4. Essentially all measured co	mbusted volumes over 50	) MCF will rec	uire payment o	f royalties and		-100 10	r record	
Signature       (Electronic Submission)       Date       11/09/2015         THIS SPACE FOR FEDERAL OR STATE OFFICE USE         Approved By		#Electronic Submission For OXY USA		TED, sent to the	e Carlsbad	•			
THIS SPACE FOR FEDERAL OR STATE OFFICE USE         Approved By_DUNCAN WHITLOCK	Name(Printed/Typed) JENNIFE	Title REGU	LATORY SPE	CIALIST					
THIS SPACE FOR FEDERAL OR STATE OFFICE USE         Approved By_DUNCAN WHITLOCK	Signature (Electronic S	Submission)		Date 11/09/2	2015				
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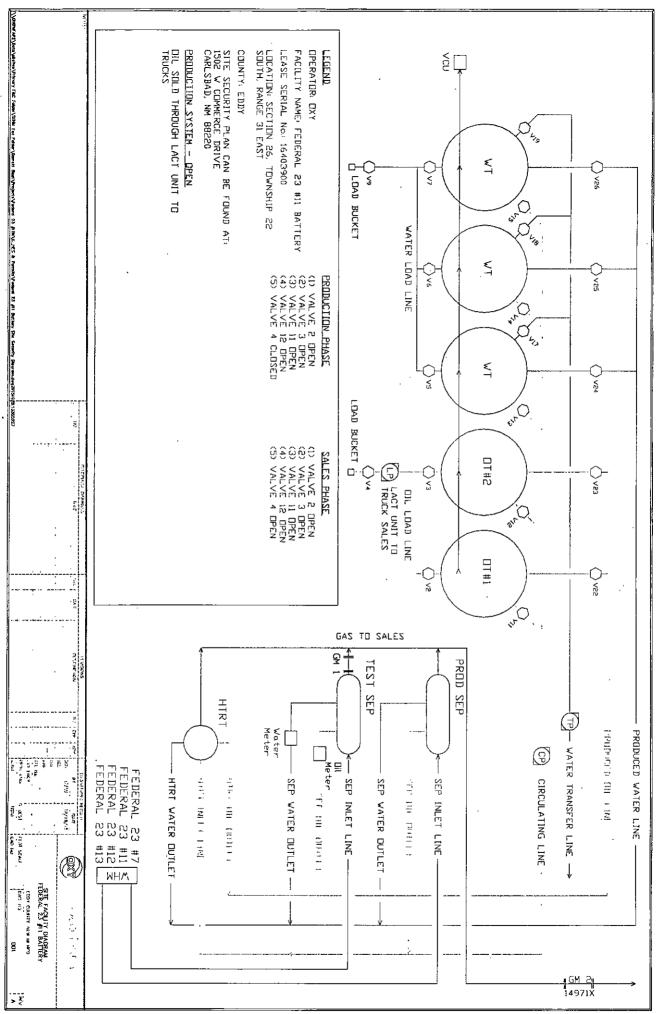
# Additional data for EC transaction #322960 that would not fit on the form

#### 32. Additional remarks, continued

volumes need to be reported on OGOR ?B? reports as disposition code ?08?. 5. Per 43 CFR 3162.7-5(d)/Onshore Order No.3.III.1.1, site facility diagram must be submitted within 60 days of equipment installation. 6. This approval does not authorize any additional surface disturbance. 7. Subject to like approval from NMOCD.

\*

Attached are the following: ? Site security diagram of the current tank battery as well as the location of the VCU and the manifold line connecting the tanks to the VCU. ? Specification sheet(s) for the VCU. ? Contact list of Company Field Representatives if access to VCU is needed to retrieve volumes being combusted



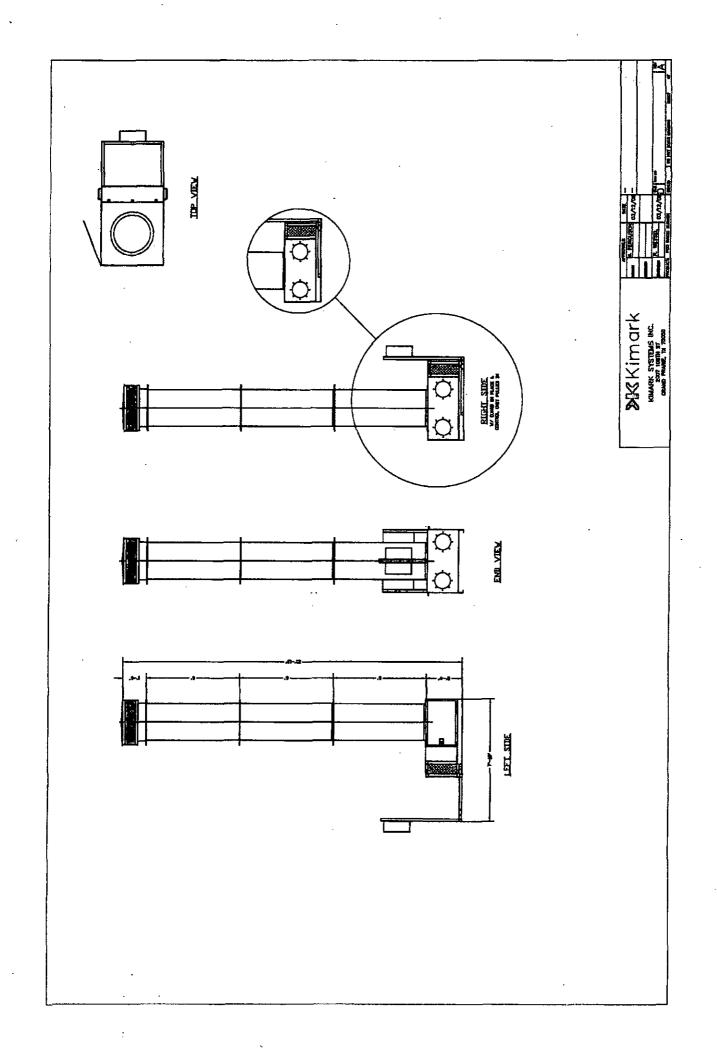


2105 Greenwood Dr. Southlake Texas 76092 P 817-416-8881 F 817-416-8886 www.kimark.com

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Specfications: Model Number **Total Height Flare Diameter Enrichment Gas? Design Heat Release Destruction Efficiency Normal Operating Pressure Design Pressure** Max Design Temperature Min Design Temperature **Normal Operating Temp** Pilot Volumetric Rate **Pilot Continuous or Automatic?** Number of burner tips **Diameter of burner tips** (inches)

SmartFlare 28 21 feet 10 inches 28 inches No 1.25 MMBTU/hr 99.90% Ounces 0 to 16 80 PSI 1900 degrees shutdown 1200 degrees 1400 degrees 8.5 to 12 SCF/hr Both - Software Selectable 1 2 inch

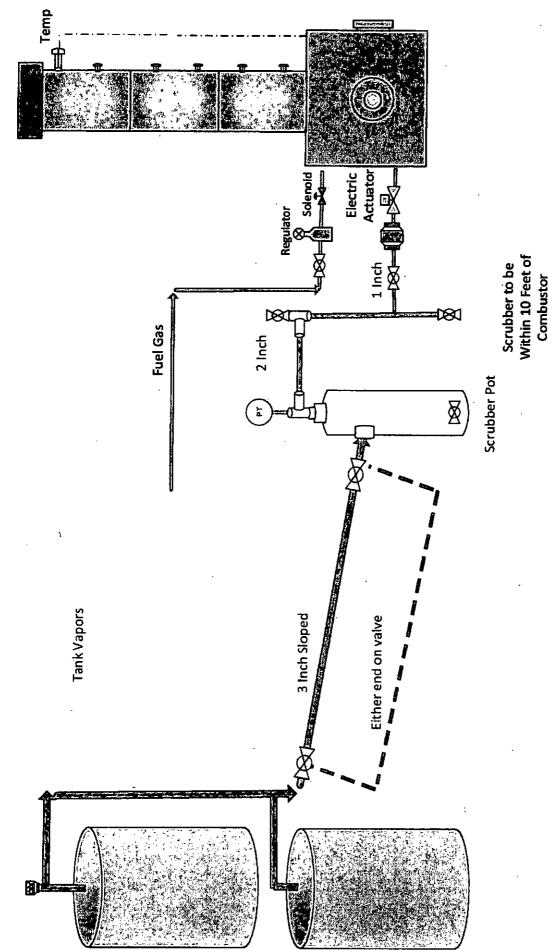


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Idmark Systems, Inc



Kimark Systems, Inc. 2105 Greenwood Dr. Southlake Texas 76092 P 817-416-8881 F 817-416-8886 www.kimark.com

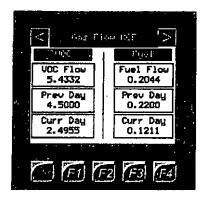
Occidental Oil & Gas

Trey Fournier 03/18/2015

The Combustor gas flow is based on AGA Report No. 3 Part 2 and Part 3. (API 14.3 Part 3 and API 14.3 Part 2). The calculation is based on the mass flow through an Orifice, measuring the pressure with an atmospheric downstream.



Gas Measurement Enter Specific Gravity for VOC and Fuel. Enter Orifice size for VOC and Fuel. The "Manual Fuel (PSI) is for entering the pressure that the fuel is delivered at.



**Totalization** Instantaneous Flow Previous Day Flow Current Day Flow All are recorded for VOC and Fuel

Randy Allen Kimark Systems

## For South Carlsbad:

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Victor Guadian 575-628-4006 (office) 575-499-6406 (cell) Terry Coor 575-628-4130 (office) 575-706-3306 (cell)

#### For North New Mexico:

Don Kendrick 575-628-4132 (office) 575-602-1484 (cell) Justin Bock 575-628-4003 (office) 575-575-706-4502 (cell)

### For Lea County:

Stan Shaver 575-397-8261 (office) 575-602-5509 (cell) Tony Summers 575-397-8203 (office) 575-390-2319 (cell)

,

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

# CONDITIONS OF APPROVAL TO INSTALL VAPOR COMBUSTOR UNIT (VCU)

1. Comply with NTL-4A requirements.

- 2. If volume being combusted is less than 50 MCF of gas per day, it is considered "unavoidably lost", therefore, no royalty obligation shall be accrued.
  - a. "Unavoidably Lost" production shall mean (1) those gas vapors which are released from storage tanks or other low-pressure vessels.
- 3. Combusted volumes over 50 MCF will require payment of royalties and volumes need to be reported on OGOR reports.
- 4. This approval does not authorize any additional surface disturbance.
- 5. Comply with any restrictions or regulation when on State or Fee surface.