Form 3160-5 (August 2007)

UNITED STATES DEPARTMENT OF THE INTERIOR

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.					5. Lease Serial No.		
					NMNM94651 6. If Indian, Allottee or Tribe Name		
							SUBMIT IN TRIPLICATE - Other instructions on reverse side.
Type of Well Gas Well □ Other Other					8. Well Name and No. CEDAR CANYON 28 FEDERAL 7H		
Name of Operator Contact: JANA MENDIOLA OXY USA INCORPORATED E-Mail: janalyn_mendiola@oxy.com					9. API Well No. 30-015-43238-00-X1		
3a. Address 5 GREENWAY PLAZA STE 1 HOUSTON, TX 77046-0521	3b. Phone No. (include area code) Ph: 432-685-5936 Fx: 432-685-5742		e)	10. Field and Pool, or Exploratory PIERCE CROSSING			
4. Location of Well (Footage, Sec., T		11. County or Parish, and State					
Sec 28 T24S R29E NESE 176			EDDY COUNTY, NM				
12. CHECK APPR	ROPRIATE BOX(ES) TO	O INDICATE	NATURE OF	NOTICE, RE	EPORT, OR OTHER	DATA	
TYPE OF SUBMISSION	TYPE OF ACTION						
☐ Notice of Intent	☐ Acidize	☐ Dee	☐ Deepen		ion (Start/Resume)	☐ Water Shut-Off	
_	☐ Alter Casing ☐		☐ Fracture Treat		ation	■ Well Integrity	
Subsequent Report	□ Casing Repair	□ Nev	v Construction	☐ Recomp	lete	Other	
☐ Final Abandonment Notice	Change Plans	□ Plug	g and Abandon	□ Tempora	arily Abandon	Drilling Operations	
	☐ Convert to Injection	Plug	g Back	■ Water Disposal			
Attach the Bond under which the wor following completion of the involved testing has been completed. Final Abdetermined that the site is ready for fi Spud 14-3/4" hole 9/12/15, dri 40BFW spacer w/ red dye the throughout job, circ 209sx (50 9/13/15 RU BOP, test @ 250# RIH & tag cmt @ 379', drill need to solve the solve the solve the solve the solve that the solve t	operations. If the operation repandonment Notices shall be fil inal inspection.) If to 435' 9/12/15, RIH & an inspection of the pump 440sx (105bbl) Fibbl) cmt to surface, WOC frow 5000# high, good te	sults in a multipled only after all set 10-3/4" 45 PC w/ additive, Install WH, set. Test csq f	e completion or recrequirements, included to the second se	completion in a niding reclamation as g @ 435', put yield, full refood test.	new interval, a Form 3160 a, have been completed, and turne OIL CONS ARTESIA DIS ed.	-4 shall be filed once and the operator has ERVATION STRICT	
test				3, 12-6-1, 3-1			
Accepted for record					RECEI	VED	
	N	MOCD	/IC				
(PD 1/24/16							
14. I hereby certify that the foregoing is	Electronic Submission #	316639 verifie	d by the BLM We	ell Information	System	-	
Comm	nitted to AFMSS for proces		TED, sent to the IFER SANCHEZ		(16JAS0675SE)		
Name (Printed/Typed) DAVID ST	Title REGU	Title REGULATORY ADVISOR					
Signature (Electronic S	Date 09/16 /2	2015					
	THIS SPACE FO	OR FEDERA	L OR STATE	OFFICE U	SE		
Approved By ACCEPT		(BLM App	prover Not Sp	ecified)	Date 10/26/2015		
Conditions of approval, if any, are attached certify that the applicant holds legal or equivalent would entitle the applicant to conduct the applicant the applicant to conduct the applicant the appl	Office Carlsba	ad					
Title 18 U.S.C. Section 1001 and Title 43 States any false, fictitious or fraudulent					ke to any department or a	gency of the United	