

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NMOC D
ARTESIA DISTRICT
JAN 08 2016
RECEIVED

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. NMNM81586
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: 432-685-5936 Fx: 432-685-5742		8. Well Name and No. CEDAR CANYON 23 FEDERAL 4H
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 22 T24S R29E SENE 1415FNL 155FEL		9. API Well No. 30-015-43281-00-X1
		10. Field and Pool, or Exploratory PIERCE CROSSING
		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 recompleate 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 recompleation 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.)

12/3/15, Skid rig from Cedar Canyon 23 Federal 5H to Cedar Canyon 23 Federal 4H, RU BOP, test @ 250# low 5000# high, good test. Test surface casing to 2500# for 30 min, good test. RIH & tag cmt @ 377', drill new formation to 459', perform FIT test to EMW=15.0ppg, 117psi, good test. 12/05/15 drill 9-7/8" hole to 7500', 12/09/15. RIH & set 7-5/8" 29.7# L-80 csg @ 7490', DVT @ 3068', ACP @ 3094', pump 40BFW spacer w/ red dye then cmt w/ 1220sx (634bbl) PPC w/ additives 10.2ppg 2.92 yield followed by 320sx (95bbl) PPH w/ additives 13.2ppg 1.66 yield, no cmt to surface, open DVT w/ 670#, circ, pump 2nd stage cement job w/ 20BFW spacer w/red dye then cmt w/ 2140sx (714bbl) PPC w/ additives 12.9ppg 1.87 yield followed by 320sx (95bbl) PPH w/ additives 13.2ppg 1.66 yield, drop cancellation plug, pressure up & close DVT, circ 540sx (180bbl) cement to surface, WOC. Install pack-off, test to 5000#, good test. ND BOP, install wellhead night cap.

12/15/16
Accepted for record
NMOC D

14. I hereby certify that the foregoing is true and correct. Electronic Submission #327574 verified by the BLM Well Information System For OXY USA INCORPORATED, sent to the Carlsbad Committed to AFMSS for processing by JENNIFER SANCHEZ on 01/04/2016 (16JAS1365SE)	
Name (Printed/Typed) DAVID STEWART	Title REGULATORY ADVISOR
Signature (Electronic Submission)	Date 12/31/2015
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.	

ACCEPTED FOR RECORD
BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE
4 2016