

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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. NMNM94651
2. Name of Operator OXY USA INCORPORATED		6. If Indian, Allottee or Tribe Name
Contact: JANA MENDIOLA E-Mail: janalyn_mendiola@oxy.com		7. If Unit or CA/Agreement, Name and/or No.
3a. Address 5 GREENWAY PLAZA SUITE 110 HOUSTON, TX 77046-0521	3b. Phone No. (include area code) Ph: 432-685-5936	8. Well Name and No. CEDAR CANYON 27 FEDERAL COM 5H
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 27 T24S R29E NWNW 1154FNL 151FWL 32.192381 N Lat, 103.979927 W Lon		9. API Well No. 30-015-43775-00-X1
		10. Field and Pool, or Exploratory UNKNOWN
		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 recompleat 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 recompleat 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.)

5/30/16 drill 9-7/8" hole to 8112', 6/2/16. RIH w/ 7-5/8" 29.7# L-80 BTC csg & set @ 8102', DVT @ 2987', ACP @ 3051'. Pump 20BFW spacer w/red dye then cmt w/ 1250sx (658bbl) PPC w/ additives 10.2ppg 2.9 yield followed by 250sx (74bbl) PPH w/additives 13.2ppg, 1.66 yield, circ 418sx (220bbl) cmt to surface, full returns throughout job. Drop cancellation plug, pressure up to 2000#, WOC. 6/5/16, install packoff, test to 5000#, ND BOP, install wellhead cap, prepare to skid rig to Cedar Canyon 27 State Com 10H. 7/4/16 Skid rig from Cedar Canyon 27 State Com 10H to Cedar Canyon 27 Federal Com 5H, RU BOP, test @ 250# low 5000# high, good test. RIH & tag DVT, drill out DVT, RIH & tag cmt @ 7962', test casing to 4200# for 30min, good test. Drill new formation to 8122', perform FIT test EMW=12.5ppg, 1225psi, good test.

**NM OIL CONSERVATION**  
ARTESIA DISTRICT

**JUL 29 2016**

**RECEIVED**

14. I hereby certify that the foregoing is true and correct. <b>Electronic Submission #344074 verified by the BLM Well Information System</b> <b>For OXY USA INCORPORATED, sent to the Carlsbad</b> <b>Committed to AFMSS for processing by PRISCILLA PEREZ on 07/08/2016 (16PP/1649SE)</b>	
Name (Printed/Typed) <b>DAVID STEWART</b>	Title <b>REGULATORY ADVISOR</b>
Signature (Electronic Submission)	Date <b>07/07/2016</b>
<b>THIS SPACE FOR FEDERAL OR STATE OFFICE USE</b>	
<b>JUL 18 2016</b>	
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.	

**\*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\***