

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 2018**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.**NMOCD**
Artesia

5. Lease Serial No. NMNM81586
6. If Indian, Allottee or Tribe Name
7. If Unit or CA/Agreement, Name and/or No.
8. Well Name and No. CEDAR CANYON 22 FEDERAL COM 4H
9. API Well No. 30-015-43708
10. Field and Pool or Exploratory Area PIERCE CROSSING BN SPRG E
11. County or Parish, State EDDY COUNTY, NM

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	2. Name of Operator OXY USA INC.	Contact: JANA MENDIOLA E-Mail: janalyn_mendiola@oxy.com	8. Well Name and No. CEDAR CANYON 22 FEDERAL COM 4H
3a. Address P.O. BOX 50250 MIDLAND, TX 79710	3b. Phone No. (include area code) Ph: 432-685-5936	9. API Well No. 30-015-43708	10. Field and Pool or Exploratory Area PIERCE CROSSING BN SPRG E
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 22 T24S R29E NESE 2540FSL 260FEL 32.202504 N Lat, 103.964108 W Lon			11. County or Parish, State EDDY COUNTY, NM

12. CHECK THE 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"/> Hydraulic Fracturing	<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	
	<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 must 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 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

12/7/16 Skid rig from Cedar Canyon 22 Federal 21H to Cedar Canyon 22 Federal Com 4H. RU BOP, test @ 250# low 5000# high. RIH & tag DVT, drill out DVT, test 7-5/8" casing to 3875# for 30 min, good test. Drill new formation to 8215', perform FIT test EMW=12.79ppg, good test. 12/8/16 Drill 6-3/4" hole to 13440'M 8728'V 12/15/16. RIH & set split csg string w/ 4-1/2" 13.5# P110 @ 13424-8848' and 5-1/2" 20# P110 csg @ 8848-0'. Pump 40BFW spacer then cmt w/ 500sx (161bbl) PPC w/ additives @ 13.2ppg 1.65 yield, full returns throughout job, no cmt to surface, WOC. ND BOP, Install pack off & test to 5000# for 15min, good test. RD Rel Rig 12/17/16.

ARTESIA DISTRICT

APR 04 2017

Accepted for record - NMOCD

14. I hereby certify that the foregoing is true and correct.	
Electronic Submission #363032 verified by the BLM Well Information System For OXY USA INC., sent to the Carlsbad Committed to AFMSS for processing by DEBORAH MCKINNEY on 02/07/2017 ()	
Name (Printed/Typed) DAVID STEWART	Title SR. REGULATORY ADVISOR
Signature (Electronic Submission)	Date 01/06/2017
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.

(Instructions on page 2)

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