Form 3160-5 (June 2015) UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT 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 page 2					FORM APPROVED OMB NO. 1004-0137 Expires: January 31, 2018 5. Lease Serial No. NMNM94651		
							6. If Indian, Allottee or Tribe Name
					7. If Unit or CA/Agreement, Name and/or No.		
					1. Type of Well Gas Well Other Other		
2. Name of Operator Contact: JANA MENDIOLA OXY USA INC. E-Mail: janalyn_mendiola@oxy.com					9. API Well No. 30-015-43645		
3a. Address P.O. BOX 50250 MIDLAND, TX 79710						10. Field and Pool or Exploratory Area PIERCE CROSSING BN SPRG,E	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)					11. County or Parish, State		
Sec 29 T24S R29E SENE 1990FNL 180FEL 32.190207 N Lat, 103.998657 W Lon					EDDY COUNTY, NM		
12. CHECK THE	APPROPRIATE BOX(ES) 1	TO INDICA	TE NATURE O	F NOTICE	, REPORT, OR OT	HER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION						
Notice of Intent	C Acidize		epen 🗖 Produc		tion (Start Resume)	□ Water Shut-Off	
	□ Alter Casing		raulic Fracturing 🛛 Recla				
Subsequent Report	Casing Repair			🗖 Recom	Drilling Operations		
Final Abandonment Notice						ramy Abandon	
	Convert to Injection			☐ Water Disposal			
pump 40BFW spacer w/ dye returns throughout job, circ rig to Cedar Canyon 29 Fed Canyon 28-27 Federal Com	Abandonment Notices must be file	d only after all & set 13-3/8" PPC w/ ado DC. Install w om Cedar C ow 5000# hi	requirements, includ 54.5# J-55 BTC litives 14.2ppg 1 rell head night ca anyon 29 Federa ah, oood test. T	ing reclamatio csg @ 667 .68 yield, fu ap and skid al 21H to Co est csg to 1	n, have been completed '', Ill edar 500# for	OIL CONSERVATICK ARTESIA DISTRICT	
						MAY 0 4 2017	
						RECEIVED	
14. I hereby certify that the foregoing	; is true and correct. Electronic Submission #3	63432 verifie	d by the BLM We	Il Informatio	n System		
		Y USA INC.,	sent to the Carlsb	bad	-		
Name (Printed Typed) DAVID	rocessing by			Y ADVISOR			
Signature (Electron	c Submission)		Date 01/10/2				
	THIS SPACE FO		L OR STATE		ISE		
_Approved By			Title			Date	
Conditions of approval, if any are atta certify that the applicant holds legal or which would entitle the applicant to co	Office						
Title 18 U.S.C. Section 1001 and Title States any false, fight FROM	43 U.S.C. Section 1212, make it a c MsEAGINE EResentations as t	crime for any pe to any matter w	rson knowingly and ithin its jurisdiction.	willfully to n	nake to any department c	r agency of the United	
(Instructions on page 2) ** OPER	ATOR-SUBMITTED ** OF	PERATOR-	SUBMITTED *	* OPERA	TOR-SUBMITTEL) **	

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