District II       District II         811 S. First St., Artesia, NM 88210       Oil Conservation Division         District III       Oil Conservation Division         1000 Rio Brazos Rd., Aztec, NM 87410       1220 South St. Francis Dr			
District III       Oil Conservation Division       Submit one copy to appropriate         1000 Rio Brazos Rd., Aztec, NM 87410       1220 South St. Francis Dr.       AMEND         District IV       1220 South St. Francis Dr.       AMEND         1220 S. St. Francis Dr., Santa Fe, NM 87505       Santa Fe, NM 87505       AMEND         I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT <sup>1</sup> Operator name and Address <sup>2</sup> OGRID Number         OXY USA Inc       16696         P.O. BOX 50250 Midland, TX 79710 <sup>3</sup> Reason for Filing Code/ Effective Date <sup>4</sup> API Number <sup>5</sup> Pool Name <sup>6</sup> Pool Code         30-015-43645       Pierce Crossing Bone Spring, East       96473 <sup>7</sup> Property Code: 304790 <sup>8</sup> Property Name: Cedar Canyon 28-27 Federal Com <sup>9</sup> Well Number: 5H			
District IV       AMEND         1220 S. St. Francis Dr., Santa Fe, NM 87505       Santa Fe, NM 87505         I.       REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT <sup>1</sup> Operator name and Address <sup>2</sup> OGRID Number         OXY USA Inc <sup>2</sup> OGRID Number         P.O. BOX 50250 Midland, TX 79710 <sup>3</sup> Reason for Filing Code/ Effective Date <sup>4</sup> API Number <sup>5</sup> Pool Name <sup>6</sup> Pool Code         30-015-43645       Pierce Crossing Bone Spring, East       96473 <sup>7</sup> Property Code: 304790 <sup>8</sup> Property Name: Cedar Canyon 28-27 Federal Com <sup>9</sup> Well Number: 5H	DED REPORT		
Interfactor       Santa Fe, NM 87505       Santa Fe, NM 87505         Interfactor       Interfactor       REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT         1 Operator name and Address       2 OGRID Number         1 Operator name and Address       2 OGRID Number         1 Operator name and Address       16696         0XY USA Inc       1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			
<sup>1</sup> Operator name and Address <sup>2</sup> OGRID Number         OXY USA Inc       16696         P.O. BOX 50250 Midland, TX 79710 <sup>3</sup> Reason for Filing Code/ Effective Date <sup>4</sup> API Number <sup>5</sup> Pool Name <sup>6</sup> Pool Code         30–015-43645       Pierce Crossing Bone Spring, East       96473 <sup>7</sup> Property Code: 304790 <sup>8</sup> Property Name: Cedar Canyon 28-27 Federal Com <sup>9</sup> Well Number: 5H			
OXY USA Inc       16696         P.O. BOX 50250 Midland, TX 79710       3 Reason for Filing Code/ Effective Date <sup>4</sup> API Number <sup>5</sup> Pool Name <sup>6</sup> Pool Code         30–015-43645       Pierce Crossing Bone Spring, East       96473 <sup>7</sup> Property Code: 304790 <sup>8</sup> Property Name: Cedar Canyon 28-27 Federal Com <sup>9</sup> Well Number: 5H			
P.O. BOX 50250 Midland, TX 79710 <sup>3</sup> Reason for Filing Code/ Effective Date <sup>4</sup> API Number 30–015-43645 <sup>5</sup> Pool Name Pierce Crossing Bone Spring, East <sup>6</sup> Pool Code 96473 <sup>7</sup> Property Code: 304790 <sup>8</sup> Property Name: Cedar Canyon 28-27 Federal Com <sup>9</sup> Well Number: 5H	1		
30-015-43645Pierce Crossing Bone Spring, East964737 Property Code: 3047908 Property Name: Cedar Canyon 28-27 Federal Com9 Well Number: 5H	- NW		
<sup>7</sup> Property Code: 304790 <sup>8</sup> Property Name: Cedar Canyon 28-27 Federal Com <sup>9</sup> Well Number: 5H			
	County		
H 29 24S 29E 1990 North180 East 1	Eddy		
<sup>11</sup> Bottom Hole Location Top Perf- 2527 FSL 351 FWL Bottom Perf- 2564 FSL 389 FEL			
	County Eddy		
<sup>12</sup> Lse Code <sup>13</sup> Producing Method <sup>14</sup> Gas Connection <sup>15</sup> C-129 Permit Number <sup>16</sup> C-129 Effective Date <sup>17</sup> C-129 Expira			
F         Code :         Date:           F         4/20/17			
III. Oil and Gas Transporters			
	G/W		
	0		
151618 ENTERPRISE FIELD SERVICES LLC (	G		
NM OIL CONSERVATIOR	a an chuit		
ARTESIA DISTRICT			
MAY 0 4 2017			
IV. Well Completion Data			
<sup>21</sup> Spud Date <sup>22</sup> Ready Date <sup>23</sup> TD <sup>24</sup> PBTD <sup>25</sup> Perforations <sup>26</sup> DHC,	MC		
12/21/16 4/9/17 18714'M 8733'V 18656'M 8733'V 8626-18482'			
<sup>27</sup> Hole Size <sup>28</sup> Casing & Tubing Size <sup>29</sup> Depth Set <sup>30</sup> Sacks Cement	t		
<u> </u>			
<u>12-1/4" 9-5/8" 8190' 2620</u>			
<u>8-1/2" 5-1/2" 8055-18704' 1790</u>			
V. Well Test Data	<del></del>		
	Pressure 65		
<sup>37</sup> Choke Size 38 Oil <sup>39</sup> Water <sup>40</sup> Gas <sup>(70)</sup>	Method		
58/6441165417042346141842 I hereby certify that the rules of the Oil Conservation Division haveOIL CONSERVATION DIVISION	<u>F</u>		
been complied with and that the information given above is true and			
complete to the best of my knowledge and belief.			
Signature: Printed name: Jana Mendiola Title: Geologist			
Printed name: Title:			
Jana Mendiola			
Title: Regulatory Coordinator			
	" النبير عادي		
E-mail Address:			
E-mail Address: janalyn_mendiola@oxy.com Date: Phone: Subsequently be revi	iewed		

Roo

	UNITED STATES PARTMENT OF THE IN UREAU OF LAND MANAG	NTERIOR		OMB N Expires: Ja	APPROVED O. 1004-0137 anuary 31, 2018	
	NOTICES AND REPOR			5 Lease Serial No. NMNM94651		
	is form for proposals to II. Use form 3160-3 (APL		-	5. If Indian, Allottee c	or Tribe Name	
SUBMIT IN 1	TRIPLICATE - Other inst	ructions on page 2		7 If Unit or CA/Agree	ement, Name and/or No.	
1 Type of Well ☐ Gas Well ☐ Oth	ler	<u> </u>		8. Well Name and No CEDAR CANYON	28-27 FEDERAL COM	
2 Name of Operator OXY USA INC.		JANA MENDIOLA endiola@oxy.com		API Well No. 30-015-43645	<u></u>	
3a. Address P.O. BOX 50250 MIDLAND, TX 79710		3b. Phone No. (include area co Ph: 432-685-5936	ode)	10. Field and Pool or PIERCE CROS	Exploratory Area SING BN SPRG,E	
4 Location of Well <i>(Footage, Sec., T.</i>	. R., M., or Survey Description)	)		11. County or Parish,	State	
Sec 29 T24S R29E SENE 199 32 190206 N Lat, 103 998657				EDDY COUNTY	Y, NM	
12. CHECK THE AF	PROPRIATE BOX(ES)	TO INDICATE NATURE	OF NOTICE, R	EPORT, OR OTH	HER DATA	
TYPE OF SUBMISSION		ТҮРЕ	OF ACTION			
□ Notice of Intent	🗖 Acidize	Deepen	Productio	n (Start/Resume)	🖸 Water Shut-Off	
Subsequent Report	☐ Alter Casing	Hydraulic Fracturin	÷ –		U Well Integrity	
Final Abandonment Notice	Casing Repair Change Plans	New Construction Plug and Abandon	□ Recomple □ Temporar		🛛 Other	
	Convert to Injection	Plug Back	U Temporar	•		
Attach the Bond under which the wor following completion of the involved testing has been completed. Final At determined that the site is ready for fi RUPU 3/9/17, RIH & clean our RIH & perf @ 18482-18354, 1 17024-16818, 16768-16564, 1 15232-15026, 14976-14770, 1 13440-13234, 13184-12980, 1 11648-11442, 11392-11182, 1 9856-9650, 9600-9394, 9344- 7946064g Slick Water + 77700 3/28/17. RIH & clean out, flow	l operations If the operation res pandonment Notices must be file inal inspection. t to PBTD @ 18656', pres 8304-18098, 18048-1784 16510-16306, 16256-1605 14720-14514, 14464-1425 12928-12722, 12672-1246 11136-10930, 10880-1067 9138, 9085-8882, 8832-8 0g 15% HCI acid + 66887	sults in a multiple completion or ed only after all requirements, in soure test csg to 9500# for 0, 17792-17586, 17538-17 50, 16000-15794, 17544-11 58, 14203-14002, 13952-11 56, 12416-12210, 12160-1 626' Total 1170 holes. Fr '52g Linear gel w/ 1649052	recompletion in a ne cluding reclamation, 30 min, good tes 7330, 17280-170 5543, 15488-152 3746, 13696-134 1954, 11901-116 0162, 10107-990 ac in 39 stages v	w interval, a Form 316 have been completed a it. 74, 82, 88, 98, 6, V/	0-4 must be filed once	
14. I hereby certify that the foregoing is			·······		RECEIVED	
14. I hereby certify that the foregoing is	Electronic Submission #3	374427 verified by the BLM (Y USA INC., sent to the Ca	Well Information S	System	RECEIVED	
14. I hereby certify that the foregoing is Name (Printed Typed) DAVID ST	Electronic Submission #: For OX	(Y USA INC., sent to the Ca	Well Information S rlsbad REGULATORY /	-	RECEIVED	
, , , , , , , , , , , , , , , , , , , ,	Electronic Submission #: For OX	Y USA INC., sent to the Ca Title SR.	rlsbad REGULATORY / 1/2017	ADVISOR		
Name (Printed Typed) DAVID ST	Electronic Submission #: For OX FEWART Submission)	Y USA INC., sent to the Ca Title SR.	risbad REGULATORY / 1/2017	ADVISOR		
Name (Printed Typed) DAVID ST	Electronic Submission #: For OX FEWART Submission)	Y USA INC., sent to the Car Title SR. Date 05/0	risbad REGULATORY 1/2017 TE OFFICE US Pending BLN	ADVISOR F Mapprovals will N be reviewed		
Name (Printed Typed) DAVID ST	Electronic Submission #: For OX TEWART Submission) THIS SPACE FC	Y USA INC., sent to the Car Title SR. Date 05/0 DR FEDERAL OR STAT Title	risbad REGULATORY / 1/2017	ADVISOR F Mapprovals will N be reviewed		

(Instructions on page 2) \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\*

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	ARTESIA DISTRICT														
Form 3160-4 August 2007)	UNITED STATES MAY 0 4 2017 CONTRACT OF THE INTERIOR MAY 0 4 2017 CONTRACT OF LAND MANAGEMENT								OMB No.	PROVED 1004-0137 Iy 31, 2010					
	WELL C	OMPL		R REC	OMPL		REPORT	AND	22A	VED			ase Seri MNM94		
la Type of		Oil Well			] Dry	D Oth									or Tribe Name
b Type of	Completion	_	ew Well	U Work		🗖 Deep	en 🗖 Plu	g Back		Diff Re		7. Üi	nit or CA	Agreen	nent Name and No.
2. Name of OXY US				-Mail: jan	Conta	t JAN		4				8. Le	ase Nan	ne and W	/ell No. N 28-27 FEDERAL CO
3. Address							3a. Phone N Ph: 432-68		de area	code)		9. A	PI Well	No.	30-015-43645
4 Location	Sec 29	T24S R2	29E Mer				al requirements	s)*				10. F P	ield and	Pool, or CROSS	Exploratory SING BN SPRG,E
At surfac			180FEL 3 Sec	28 T24S	R29E Me	er						11 8	Sec., T	R., M., o	r Block and Survey
• •		27 T24S	R29E Mer				.188152 N La	it, 103.9	96978	3 W Lo	∩	12 (	County o	r Parish	13. State
At total c 14. Date Spi	<u> </u>	SE 2569F		ate T.D. Re		103.96	64373 W Lon	e Comple	eted				DDY	IS (DF. K	B, RT, GL)*
12/21/20	016	MD		/05/2017		and T f	D & 04/0	A 29/2017	Read	ly to Pr	od.			29`48 GL	-
18. Total De		TVD	8733		9. Plug B		D.: MD TVD		8656 733		20. Deptl				MD TVD
21. Type Eld MUD LC	)G					each)	- <u></u>		22.	Was D	vell cored? OST run? ional Surv		🛛 No 🖾 No 🗋 No	- 🗖 Ye	es (Submit analysis) es (Submit analysis) es (Submit analysis)
23. Casing and				set in well Top	/) Bot	tom	Stage Cementer	No	of Sks	. &	Slurry V	/0			
Hole Size	Size/Gi	ade	Wt. (#/ft.)	(MD)	(M		Depth	1	of Ce		(BBL		Ceme	nt Top*	Amount Pulled
17.500 12.250	<u> </u>	375 J55 325 L80	<u>54.5</u> 47.0		0	667 8190	2966			735 2620		220		960	
8.500		0 P110	20.0			8704	2900	<u>}</u>		1790		211 528		805	
								<u> </u>							
	<u> </u>			<u>                                     </u>		-+		┼──						<u></u>	<u> </u>
24. Tubing I	Record			·				4 ~~			· ,		L		
Size I	Depth Set (M	ID) Pa	cker Depth	(MD)	Size	Depth	Set (MD)	Packer D	epth (N	MD)	Size	De	pth Set	(MD)	Packer Depth (MD)
25. Producin	<u> </u>	<u> </u>				26. P	erforation Rec			~ <b></b>		<b>T</b> .			
	BONE SP	RING	Top	8626	Bottom 18482	2	Perforated	Interval 8626 T		82	Size 0.42		<u>vo. Hole</u> 11	s 70 ACT	Perf. Status
B)							· · · · · · · · · · · · · · · · · · ·								
C) D)												+-			
	acture, Treat	ment, Cen	nent Squeezo	e, Etc.											
E	Depth Interva		00 70 1000			777000		mount a		_					
<u> </u>	862	6 TO 184	82 / 94606	4G SLICK	WATER +	///00G	15% HCL ACI	D + 6688	752G		GEL W/ 1	6490	1524# SA	ND	<u> </u>
28. Productio	on - Interval	A													
	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Wa BB		iravity A PI		Gas Gravity	Р	roduct	ion Method	1	
	04/26/2017	24		1654.0	2346		1704.0			Clavity			FL	OWS FF	
	Tbg Press Flwg	Csg Press	24 Hr Rate	Oil BBL	Gas MCF	Wa BB				Well St	atus				
	SI	765.0		1654	234	5	1704	1418		Р	ow				
	tion - Interva Test	i B Hours	Test	Oil	Gas	Wa	ter Oil C	iravity		Gas	P	roduct	ion Methor		
	Date	Tested	Production	BBL	MCF	BB				Gravity	ľ	. ouuti	.on anothor		ovals will reviewed
	Tbg Press	Csg	24 Hr	Oil	Gas	Wa				Well St	atus	الم م	ng BLN	V abh	revieweu
Size	Flwg SI	Press		BBL	MCF	BB	L Rano	,		1	pe	nui	equen scann	tly De	
1														-	

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28h Produ	uction - Interv	alC		·		<u> </u>		<u> </u>			<u></u>		
Date First	Test	Hours	Test	Oil	Gas	Water	Oil Gravity	Gas		Production Method			
Produced	Date	Tested	Production	BBL	MCF	BBL	BBL Corr API Gravity Water Gas Oil Well Status						
Choke Size	Tbg Press Flwg SI	Csg Press	24 Hr Rate	Oil BBL	Gas MCF	Water BBL	Gas Oil Ratio	Well	Status				
28c. Produ	uction - Interv	al D		L	L	-4							
Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr API	Gas Gravit					
Choke Size								Well S	Well Status				
29. Dispos SOLD	sition of Gas(.	Sold, used	for fuel, vent	ed, etc.)	ł			<u></u> _ <b>k</b>		-*			
<u> </u>	ary of Porous	Zones (Ir	nclude Aquife	rs):			<u> </u>		31. For	rmation (Log) Markers			
Show tests, i	all important.	zones of p	orosity and c	ontents there	eof Cored e tool open	intervals and flowing and	all drill-stem shut-in pressure	es					
	Formation		Тор	Bottom		Descriptio	ons, Contents, et	c		Name	Top Meas. Depth		
32. Additi	CANYON CANYON RING					L, GAS, WA L, GAS, WA L, GAS, WA L, GAS, WA L, GAS, WA	ATER ATER ATER ATER		SA CA DE BE CH BR	JSTLER ALADO ASTILE ELAWARE ELAWARE EL CANYON HERRY CANYON RUSHY CANYON DNE SPRING	329 732 1364 2904 2952 3643 5100 6664		
1ST E	BONE SPRIN BONE SPRIN	IG 76	65' MD 801' MD	D:									
	were mailed leader, Direc		ırvey, As-Dri	lled Amenc	led C-102	plat & WB[	D are attached.						
1. Ele	enclosed atta ectrical/Mecha ndry Notice fo	inical Log		• /	···	<ol> <li>Geologie</li> <li>Core An</li> </ol>	•		DST Re Other	eport 4. Dire	ctional Survey		
34. 1 herel	by certify that	the foreg	0		ission #374	4428 Verifie	orrect as determined by the BLM v , sent to the Ca	Well Inforn		e records (see attached instru ystem.	actions):		
Name	(please print)	DAVID	STEWART_		····	<u> </u>	Title	SR. REGU	LATOR	Y ADVISOR			
	ture	(Electro	nic Submiss	ion)			Date	05/01/2017	7				

\*\* ORIGINAL \*\*

## Additional data for transaction #374428 that would not fit on the form

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32. Additional remarks, continued

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