

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NMOCD
Artesia

FORM 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.

5. Lease Serial No.
NMNM81586

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well
 Oil Well Gas Well Other

8. Well Name and No.
CEDAR CANYON 23-24 FEDERAL 31H

2. Name of Operator
OXY USA INC. Contact: JANA MENDIOLA
E-Mail: janalyn_mendiola@oxy.com

9. API Well No.
30-015-44179

3a. Address
P.O. BOX 50250
MIDLAND, TX 79710

3b. Phone No. (include area code)
Ph: 432-685-5936

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 NENE 491FNL 177FEL
32.208883 N Lat, 103.964323 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	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 recomplete 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 recompletion 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.

7/13/17 Skid rig back to Cedar Canyon 23-24 Federal 31H. RU BOP, test @ 250# 16w 5000# high, test 10-3/4" casing to 1500# for 30 min, good test. RIH & drill new formation to 455', perform FIT test to EMW=20.5ppg, good test. 7/14/17 drill 9-7/8" hole to 9358', 7/17/17. RIH & set 7-5/8" 29.7# L80 csg @ 9346', DVT @ 3067', ACP @ 3081' pump 40BFW spacer then cmt w/ 470sx (257bbl) PPC w/ additives 10.2ppg 3.07 yield followed by 165sx (48bbl) PPC w/ additives 13.2ppg 1.64 yield, full returns throughout job, inflate ACP to 2100#, open DVT, circ thru DVT, circ 100sx (55bbl) cmt to surf. Pump 2nd stage w/ 20BFW spacer then cmt w/ 545sx (181bbl) PPC w/ additives 12.9ppg 1.89 yield followed by 185sx (44bbl) PPC w/ additives 14.8ppg 1:33 yield, drop cancellation plug, pressure up & close DVT, circ 54sx (18bbl) cmt to surface, WOC. Install pack-off, test to 5000# for 15 min, good test. 7/20/17 ND BOP & install well head night cap.

NM OIL CONSERVATION
ARTESIA DISTRICT

AUG 29 2017

RECEIVED

BC 8-29-17
Accepted for record - NMOCD

14. I hereby certify that the foregoing is true and correct.
Electronic Submission #382864 verified by the BLM Well Information System
For OXY USA INC., sent to the Carlsbad
Committed to AFMSS for processing by PRISCILLA PEREZ on 07/29/2017 ()

Name (Printed/Typed) DAVID STEWART Title SR. REGULATORY ADVISOR

Signature (Electronic Submission) Date 07/27/2017

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 _____
BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD 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 ****