

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.

Form Serial No.  
NMNM62896

If Indian, Allottee or Tribe Name

## 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		7. If Unit or CA/Agreement, Name and/or No.
2. Name of Operator OXY USA INCORPORATED Contact: DAVID STEWART E-Mail: david_stewart@oxy.com		8. Well Name and No. NIMITZ MDP1 12 FEDERAL COM 8H
3a. Address 5 GREENWAY PLAZA SUITE 110 HOUSTON, TX 77046-0521	3b. Phone No. (include area code) Ph: 432.685.5717	9. API Well No. 30-015-44527-00-X1
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 13 T24S R30E NENW 228FNL 2405FWL 32.224522 N Lat, 103.835136 W Lon		10. Field and Pool or Exploratory Area COTTONWOOD DRAW-BONE SPRING
		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 checked="" 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 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	Change to Original A
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	PD

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 recomplate 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.

OXY USA Inc. respectfully requests that the following well name be changed due to extending the horizontal lateral to include Section 1 T24S R30E, NMNM97133, see attached for amended C-102.

Original Name and Number  
Nimitz MDP1 12 Federal #8H

319810

New Name and Number  
Nimitz MDP1 12 Federal Com. #8H

319812

SC 2-16-18  
Accepted for record - NMOCD

NM OIL CONSERVATION  
ARTESIA DISTRICT

FEB 16 2018

OFFICIAL

14. I hereby certify that the foregoing is true and correct. Electronic Submission #402876 verified by the BLM Well Information System For OXY USA INCORPORATED, sent to the Carlsbad Committed to AFMSS for processing by PRISCILLA PEREZ on 02/01/2018 (18PP0994SE)	
Name (Printed/Typed) DAVID STEWART	Title REGULATORY ADVISOR
Signature (Electronic Submission)	Date 01/31/2018

## THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By MUSTAFA HAQUE	Title PETROLEUM ENGINEER	Date 02/09/201
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 Carlsbad

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)

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

District I  
 1425 N. French Dr., Hobbs, NM 88240  
 Phone: (505) 793-4141 Fax: (505) 793-4720  
 District II  
 811 S. First St., Artesia, NM 88210  
 Phone: (505) 748-1243 Fax: (505) 748-9720  
 District III  
 1600 Rio Grande Road, Alamogordo, NM 88310  
 Phone: (505) 334-8179 Fax: (505) 334-6170  
 District IV  
 1220 S. St. Francis Dr., Santa Fe, NM 87503  
 Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico  
 Energy, Minerals & Natural Resources Department  
**OIL CONSERVATION DIVISION**  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

Form C-102  
 Revised August 1, 2011  
 Submit one copy to appropriate  
 District Office

☒ AMENDED REPORT

**WELL LOCATION AND ACREAGE DEDICATION PLAT**

API Number <b>30-015-44527</b>	Pool Code <b>13367</b>	Pool Name <b>Cotton Draw; Bone Spring</b>
Property Code <b>319610</b>	Property Name <b>NIMITZ MDPI "12" FEDERAL COM</b>	Well Number <b>BH</b>
OGRID No. <b>16696</b>	Operator Name <b>OXY USA INC.</b>	Elevation <b>3506.7'</b>

**Surface Location**

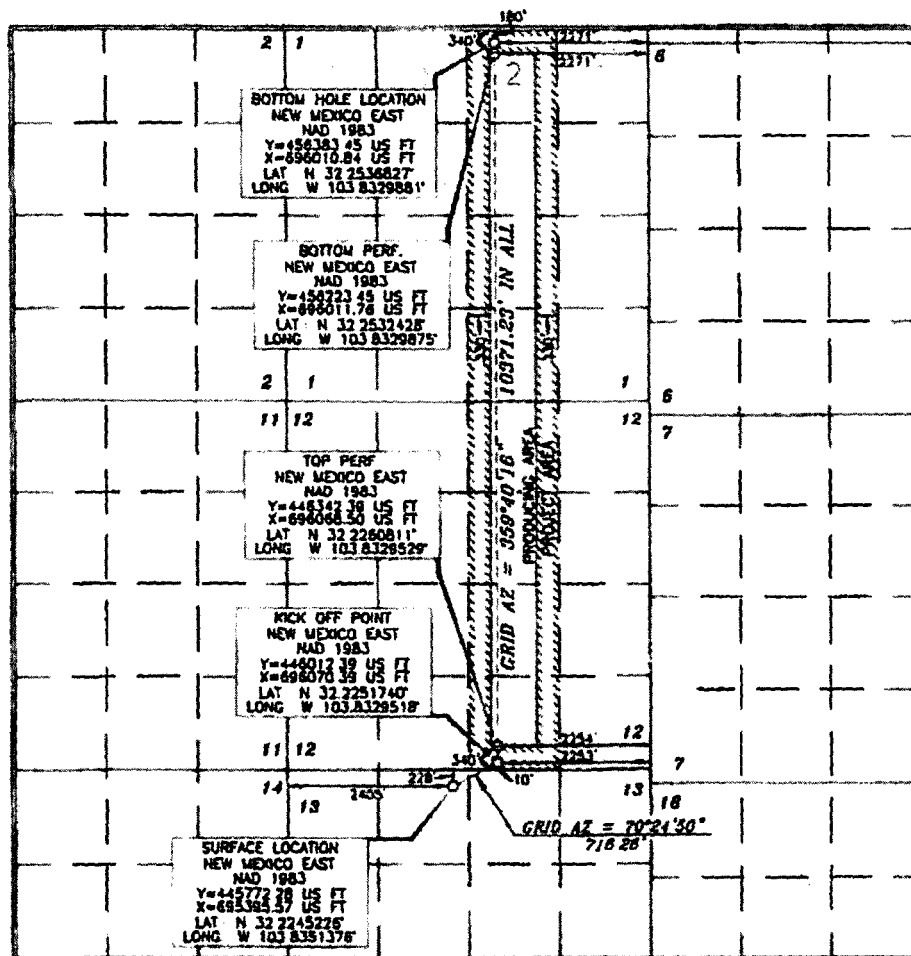
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
<b>C</b>	<b>13</b>	<b>24 SOUTH</b>	<b>30 EAST, N.M.P.M.</b>		<b>228'</b>	<b>NORTH</b>	<b>2405'</b>	<b>WEST</b>	<b>EDDY</b>

**Bottom Hole Location If Different From Surface**

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
<b>2</b>	<b>1</b>	<b>24 SOUTH</b>	<b>30 EAST, N.M.P.M.</b>		<b>180'</b>	<b>NORTH</b>	<b>2271'</b>	<b>EAST</b>	<b>EDDY</b>

Dedicated Acres <b>320</b> <b>319.96</b>	Joint or Infill <b>Y</b>	Consolidation Code	Order No.
--	-----------------------------	--------------------	-----------

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.



**OPERATOR CERTIFICATION**

I hereby certify that the information contained herein is true and  
 complete to the best of my knowledge and belief, and that the  
 organization under whose name this well is being drilled or  
 completed has a right to drill this well at this location pursuant to a contract  
 with an owner of such a mineral or working interest, or as a  
 voluntary pooling agreement or a compulsory pooling order  
 hereunder entered by the division.

Signed: Sarah Mitchell 9/25/11  
 Printed Name: Sarah Mitchell  
 E-mail Address: Sarah-mitchell@oxy.com

**SURVEYOR CERTIFICATION**

I hereby certify that the information shown on this  
 plat was prepared by a duly licensed and qualified surveyor  
 made by the surveyor or his/her representative, and that the  
 same is true and correct to the best of my knowledge.

Date of Survey: 15079  
 Signature and Seal: [Signature]  
 Professional Surveyor: 15079  
 Certificate Number: 15079