Form 3160-5 (June 2015)	UNITED STATE DEPARTMENT OF THE I		The CORDON	NEERVA	OMB N	APPROVED O. 1004-0137	
SUNDE		ARTIMENT OF THE INTERIOR UREAU OF LAND MANAGEMENT NOTICES AND REPORTS ON WELLS WAR () 5 200			Expires: January 31, 2018 5. Lease Serial No. NMNM0924		
Do not use	this form for proposals to well. Use form 3160-3 (AP	drill or to r	e-enter an	9.9.21010	6. If Indian, Allottee o	or Tribe Name	
SUBMIT IN TRIPLICATE - Other instructions on page 2					7. If Unit or CA/Agreement, Name and/or No.		
1. Type of Well					8. Well Name and No. SOUTH LOCO HILLS UNIT 23		
Oil Well Gas Well Other: INJECTION     Ontact: CASEY L SUMMERS					9. API Well No.		
OXY USÁ INC E-Mail: casey_summers@oxy.com					30-015-03531		
3a. Address PO BOX 4294 HOUSTON, TX 77210	No. (include area code) 513-8289	-8289 10. Field and Pool or Exploratory Area LOCO HILLS QUGBSA					
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)					11. County or Parish, State		
Sec 30 T18S R29E NENW 660FNL 1980FWL					EDDY COUNTY, NM		
12. CHECK THE	APPROPRIATE BOX(ES)	TO INDIC	ATE NATURE OI	F NOTICE.	REPORT, OR OTH	HER DATA	
TYPE OF SUBMISSION		TYPE OF ACTION					
□ Notice of Intent	C Acidize	D D	Deepen		tion (Start/Resume)	□ Water Shut-Off	
_	Alter Casing				ation	U Well Integrity	
Subsequent Report	Casing Repair		ew Construction	Recomplete		D Other	
Final Abandonment Notice	andonment Notice Change Plans		<ul> <li>Plug and Abandon</li> <li>Tempo</li> <li>Plug Back</li> <li>Water</li> </ul>		rarily Abandon Disposal		
following completion of the invo testing has been completed. Fina determined that the site is ready OXY USA INC reports that measures taken to reclaim	work will be performed or provid lved operations. If the operation r I Abandonment Notices must be fi for final inspection. for the location above, site the site to BLM standards a placement of site into ?No F	esults in a mult led only after a inspections are complete	iple completion or reco Ill requirements, includ confirm that all cor and satisfactory.	mpletion in a ing reclamatio rective Final	new interval, a Form 316	50-4 must be filed once	
	Accepted	3-e for record	NMOCD				
14. I hereby certify that the foregoin Name(Printed/Typed) CASE	Electronic Submission	XY USA INC	, sent to the Carlsb by DEBORAH MCKI	ad NNEY on 05	•		
	Data 05/40/2	Date 05/10/2017					
	nic Submission)		Date 05/10/20		SF		
Accepted for Rec	A Am			pv . A		<b>2.28-18</b> Date	
Conditions of approval, if any, are atta certify that the applicant holds legal o which would entitle the applicant to ca	r equitable title to those rights in the		r	clabor	{		
Title 18 U.S.C. Section 1001 and Title States any false, fictitious or fraudul	e 43 U.S.C. Section 1212, make it a ent statements or representations a	a crime for any s to any matter	person knowingly and within its jurisdiction.	willfully to m	ake to any department or	r agency of the United	
(Instructions on page 2)						. ++	

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

3-21-14 Amos