

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

AFM OGD

5 Lease Serial No
NMNM0546732

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 ☐ Other2 Name of Operator
OCCIDENTAL PERMIAN LTDContact JENNIFER A SMITH
E-Mail JENNIFER_SMITH@OXY.COM8 Well Name and No
FEDERAL 12 1H9 API Well No
30-015-408403a Address
PO BOX 4294
HOUSTON, TX 772103b Phone No (include area code)
Ph 713-513-664010 Field and Pool or Exploratory Area
QUAHADA RIDGE-DELAWARE4 Location of Well (Footage Sec T R M or Survey Description)
Sec 1 T23S R30E SWSE 1159FSL 1343FEL11 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 Venting and/or Flaring
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<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 recompleat 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.

OCCIDENTAL PERMIAN LTD respectfully reports that the above location ended the 90 days of flaring from JANUARY 12, 2018 to APRIL 12, 2018 that was caused by issues with Energy Transfer compressors and high line pressure. Total Flare = 8909 3 mcf

JANUARY ? 1256 5 mcf
FEBRUARY ? 481 8 mcf
MARCH ? 2944 mcf
APRIL- 4227 mcf

1 well associated

RECEIVED

4/23/18 AB
FOR RECORDS ONLY

APR 19 2018

DISTRICT II-ARTESIA O.C.D.

14 I hereby certify that the foregoing is true and correct	
Electronic Submission #412078 verified by the BLM Well Information System For OCCIDENTAL PERMIAN LTD, sent to the Carlsbad Committed to AFMSS for processing by JENNIFER SANCHEZ on 04/18/2018 ()	
Name (Printed/Typed) JENNIFER A SMITH	Title ENVIRONMENTAL SPECIALIST
Signature (Electronic Submission)	Date 04/18/2018
THIS SPACE FOR FEDERAL OR STATE OFFICE USE	
Approved By _____ Title _____ Date _____	
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.	
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 **