

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.5. Lease Serial No.
NMNM38464

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.
PURE GOLD A FEDERAL 139. API Well No.
30-015-3530610. Field and Pool or Exploratory Area
SAND DUNES DELAWARE, W11. County or Parish, State
EDDY COUNTY, NM**SUBMIT IN TRIPLICATE - Other instructions on page 2**1. Type of Well
☒ Oil Well ☐ Gas Well ☐ Other2. Name of Operator
OXY USA INC.
Contact: DAVID STEWART
E-Mail: david_stewart@oxy.com3a. Address
P.O. BOX 50250
MIDLAND, TX 797103b. Phone No. (include area code)
Ph: 432-685-5717
Fx: 432-685-57424. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 21 T23S R31E SWNE 1860FNL 1980FEL
32.292057 N Lat, 103.780632 W Lon**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 type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input checked="" 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 recomple 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.

6/15/2018 RU PU, NDWH, NU BOP

6/16/2018 RIH & tag cmt/CIBP @ 6628', PUH to 6050', M&P 25sx CL C cmt, PUH, WOC.

6/18/2018 RIH & tag cmt @ 5740'. PUH to 5092', M&P 25sx CL C cmt, PUH, WOC. RIH & tag cmt @ 4777', PUH to 4150', M&P 150sx CL C cmt, PUH, WOC.

6/19/2018 RIH & tag cmt @ 2950', M&P 130sx CL C cmt, PUH, WOC. RIH & tag cmt @ 1995', M&P 150sx CL C cmt, PUH, WOC.

6/20/2018 RIH & tag cmt @ 626', M&P 115sx CL C cmt, circ cmt to surface. ND BOP NU B-1 Adapter flange, top off casing, RDPU.

14. I hereby certify that the foregoing is true and correct.

**Electronic Submission #424833 verified by the BLM Well Information System
For OXY USA INC., sent to the Carlsbad**

Name (Printed/Typed) DAVID STEWART

Title SR. REGULATORY ADVISOR

Signature (Electronic Submission)

Date 06/20/2018

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.		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 ****RECEIVED
JUN 25 2018
DISTRICT # ARTESIA O.C.D.