	NM OIL CONSERVATION ARTESIA DISTRICT					
Form 3160-5 (June 2015)	UNITED STATES DEPARTMENT OF THE INTE BUREAU OF LAND MANAGEM	RIOR IAN 3	8 1 2019	FORM OMB N Expires: J	APPROVED O. 1004-0137 anuary 31, 2018	
SUND	ON WELLS	onter an DECEWED		5. Lease Serial No. NMNM89172		
abandoned	or to re-enter an REC or such proposals.			6. If Indian, Allottee or Tribe Name		
SUBMIT IN TRIPLICATE - Other instructions on page 2				7. If Unit or CA/Agreement, Name and/or No.		
I. Type of Well				8. Well Name and No. PATTON MDP1 17 FEDERAL 176H		
2. Name of Operator OXY USA INCORPORATE	Contact: DAV D E-Mail: davld_stewart@	ID STEWART		9. API Well No. 30-015-45079-00-X1		
3a. Address 5 GREENWAY PLAZA SU HOUSTON, TX 77046-052	Phone No. (include area code) : 432.685.5717		10. Field and Pool or Exploratory Area WOLFCAMP			
4. Location of Well (Footage, Sec			11. County or Parish,	State		
Sec 17 T24S R31E NENE 32.222477 N Lat, 103.7954			EDDY COUNTY, NM			
12. CHECK THE	APPROPRIATE BOX(ES) TO	INDICATE NATURE O	F NOTICE,	REPORT, OR OTI	HER DATA	
TYPE OF SUBMISSION		TYPE OF ACTION				
Notice of Intent	Acidize	🗖 Deepen	Product	ion (Start/Resume)	□ Water Shut-Off	
Subsequent Report	Alter Casing	□ Hydraulic Fracturing	C Reclam	ation	Well Integrity	
Final Abandonment Notice	Casing Repair	New Construction	C Recomp	C L		
	Change Plans	Plug and Abandon Plug Back	Tempor Water E	arily Abandon Disposal	PD	
tonoving completion of the invol testing has been completed. Fina determined that the site is ready f	work will be performed or provide the B ved operations. If the operation results i Abandonment Notices must be filed onl or final inspection. requests to amend the target forr in the 7-5/8" intermediate casing	n a multiple completion or reco ly after all requirements, includ nation from the Wolfcam I, see attached for details	to the 1st	new interval, a Form 316 n, have been completed a	i0-4 must be filed once and the operator has	
14. I hereby certify that the foregoin	g is true and correct. Electronic Submission #4371(06 verified by the BLM We	i information			
c	For OXY USA INC committed to AFMSS for processin	ORPORATED, sent to the	Carlshad	-		
Name (Printed/Typed) DAVID						
Signature (Electror	Date 09/26/2	Date 09/26/2018				
	THIS SPACE FOR F	EDERAL OR STATE	OFFICE U	SE		
_Approved_By_ZQTA_STEVENS	THERETROLE		~~~	Date 10/00/2018		
Conditions of approval, if any, are atta certify that the applicant holds legal or which would entitle the applicant to co	varrant or ect lease	TitlePETROLEUM ENGINEER Date 10/09/2018 Office Carlsbad Date 10/09/2018				
Title 18 U.S.C. Section 1001 and Title States any false, fictitious or fraudule	43 U.S.C. Section 1212, make it a crime and statements or representations as to any	for any person knowingly and y matter within its jurisdiction.	willfully to m	ike to any department or	agency of the United	
(Instructions on page 2)	EVISED ** BLM REVISED **) ** BLM REVISE	D **	

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