

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT**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 APPROVED  
OMB NO. 1004-0137  
Expires: January 31, 20185. Lease Serial No.  
NMNM40659

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.  
NMNM1389378. Well Name and No.  
IRIDIUM MDP1 28-21 FEDERAL COM 41H9. API Well No.  
30-015-45075-00-X110. Field and Pool or Exploratory Area  
INGLE WELLS11. 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 INCORPORATEDContact: SARAH CHAPMAN  
E-Mail: SARAH\_CHAPMAN@OXY.COM3a. Address  
5 GREENWAY PLAZA SUITE 110  
HOUSTON, TX 77046-05213b. Phone No. (include area code)  
Ph: 713-350-4997  
N.M. OIL CONSERVATION  
ARTESIA DISTRICT

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Sec 28 T23S R31E SWSW 610FSL 683FWL  
32.269855 N Lat, 103.789085 W Lon

FEB 08 2019

## 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 Workover Operations
	<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 recompleat 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.

RUPU 12/03/18, RIH & cleanout to PBTD @ 18013', pressure test 5-1/2" csg to 9800# for 30 minutes, good test. RIH & perf @ 17951-17798, 17748-17595, 17547-17392, 17342-17187, 17139-16987, 16936-16783, 16733-16579, 16530-16377, 16327-16174, 16124-15971, 15923-15768, 15718-15570, 15515-15362, 15313-15159, 15110-14956, 14908-14753, 14703-14553, 14498-14347, 14297-14141, 14086-13940, 13891-13738, 13688-13535, 13485-13332, 13282-13129, 13079-12929, 12876-12723, 12673-12520, 12470-12317, 12259-12112, 12056-11909, 11848-11706, 11658-11501, 11455-11302, 11252-11098, 11049-10896, 10790-10693, 10643-10490, 10435-10287, 10237-10089, 10034-9881, 9831-9676, 9628-9475. Frac in 42 stags w/ 13499430 gal Slick Water, 5940gal 15% HCl acid w/ 16819107# sand. RD Schlumberger 12/18/18, turn well over to production for clean out, flowback and test.

Accepted For Record  
NMOCD  
2-12-19

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

Electronic Submission #449096 verified by the BLM Well Information System  
For OXY USA INCORPORATED, sent to the Carlsbad  
Committed to AFMSS for processing by JONATHON W SHEPARD on 01/08/2019 (19JS0025SE)

Name (Printed/Typed) DAVID STEWART

Title REGULATORY ADVISOR

Signature (Electronic Submission)

Date 01/07/2019

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

FEB 01 2019

/s/ Jonathon Shepard

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 any statement or representation to any matter within its jurisdiction which is 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 \*\*