

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.
NMNM43744
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**8. Well Name and No.
PLATINUM MDP1 34-3 FEDERAL9. API Well No.
30-015-45229-00-X110. Field and Pool or Exploratory Area
INGLE WELLS11. County or Parish, State
EDDY COUNTY, NM

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

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

Sec 34 T23S R31E NENW 400FNL 2627FWL
32.267086 N Lat, 103.765709 W Lon

FEB 14 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 (
	<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 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 1/14/19, RIH & cleanout to PBTD @ 20338', pressure test csg to 9800# for 30 min, good test.
Perf @ 20285-20129, 20077-19921, 19869-19713, 19661-19505, 19453-19297, 19245-19089, 19037-18881,
18829-18673, 18622-18468, 18417-18261, 18205-18046, 17999-17841, 17789-17633, 17581-17427,
17375-17217, 17167-17009, 16957-16801, 16753-16593, 16541-16385, 16333-16177, 16125-15969,
15917-15761, 15709-15555, 15501-15345, 15293-15137, 15082-14929, 14877-14721, 14669-14513,
14458-14305, 14253-14095, 14045-13889, 13837-13681, 13629-13473, 13421-13265, 13213-13057,
13005-12849, 12797-12641, 12589-12433, 12911-12762, 12173-12017, 11966-11809, 11757-11601,
11549-11393, 11341-11185, 11133-10977, 10926-10769, 10717-10557, 10509-10353, 10301-10145,
10093-9937. Total 1216 holes. Frac in 50 stages w/ 15172416g slickwater & 10000g 7.5% HCl Acid w/
20023592# sand. RD Schlumberger 2/6/19, RIH and clean out for flowback and to test well for
potential.

Accepted For Record
NMOCD
2.20.19

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

Electronic Submission #454201 verified by the BLM Well Information System
For OXY USA INCORPORATED, sent to the Carlsbad
Committed to AFMSS for processing by PRISCILLA PEREZ on 02/12/2019 (19PP1049SE)

Name (Printed/Typed) DAVID STEWART

Title REGULATORY ADVISOR

Signature (Electronic Submission)

Date 02/12/2019

ENTERED
2.20.19

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

/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 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)

** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED **