Form 3160-5 (June 2015)

Carisbad Field Office FORM APPROVED OMB NO. 1004-0137 Expires: January 31, 2018

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DEPARTMENT OF THE INTERIOR			Q1,12
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SUNDRY NOTICES	AND REPORTS	ON WELLS	
Do not use this form for	proposals to drill (	or to re-enter	an
abandoned well. Use for	m 3160-3 (APD) for	such propos	als.

6. If Indian, Allottee or Tribe Name

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SUBMIT IN TRIPLICATE - Other instructions on page 2			7. If Unit or CA/Agreement, Name and/or No.					
Type of Well     Gas Well □ Other			8. Well Name and No. STERLING SILVER MDP1 33-4 FD C 1H					
Name of Operator Contact: SARAH CHAPMAN     OXY USA INCORPORATED E-Mail: SARAH_CHAPMAN@OXY.COM			9. API Well No. 30-015-45335-00-X1					
3a. Address 5 GREENWAY PLAZA SUITE 110 HOUSTON, TX 77046-0521  3b. Phone No. (include area code) / ATION Ph: 719-350-4507/NO. TX			10. Field and Pool or Exploratory Area INGLE WELLS					
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  Sec 33 T23S R31E NWNW 90FNL 834FWL 32.267933 N Lat, 103.788589 W Lon		)	MAR 1 1 2019		11. County or Parish, State EDDY COUNTY, NM			
RECEIVED				·				
12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA								
TYPE OF SUBMISSION			TYPE OF	ACTION				
☐ Notice of Intent	☐ Acidize	☐ Dee	pen	☐ Producti	on (Start/Resume)	■ Water Shut-Off		
_	☐ Alter Casing	☐ Hyd	raulic Fracturing	□ Reclama	ation	■ Well Integrity		
Subsequent Report	□ Casing Repair	□ Nev	Construction	□ Recomp	lete	Other Drilling Operations		
☐ Final Abandonment Notice	□ Change Plans	☐ Plug	and Abandon	☐ Tempora	arily Abandon	Diffing Operations		
	☐ Convert to Injection	Plug	Back	☐ Water D	risposal			
If the proposal is to deepen directionally or recomplete 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.  1/27/19 RU NOP and test to 5000# high 250# low, good test. Test 9-5/8" csg to 1500# for 30 minutes, good test. RIH & drill new formation to 4340', perform FIT to EMW=9.2ppg 1198#, good test. Drill 8-1/2" hole to 9269'. RIH & set 7-5/8" 26.4# HCL-80 FJ/SF csg @ 9259', pump 40bbl mudpush then cmt w/ 144sxs (41bbl) class H w/ additives 13.2ppg 1.6 yield. Pump bradenhead cmt job w/ 388xs (135bbl) class C w/ additives 12.8ppg 1.96 yield. WOC, ran echometer, TOC @ 62'. Perform top job w/ 16sxs (5bbl) class C w/ additives 12.8ppg 1.75 yield. Cement to surface.  2/2/19 test BOP to 5000# high 250# low, good test. Test 7-5/8" csg to 2600# for 30 minutes, good test. RIH & drill new formation to 9274', perform FIT to EMW=12.2ppg 1160#, good test. Drill 6-3/4" hole to 20399'M/9933'V. RIH & set 5-1/2" 20# SF TORQ/DQX csg @ 20371', pump 130bbl mudpush spacer then cmt w/ 909sxs (220bbl) class C w/ additives 13.2ppg 1.39 yield. Full returns throughout job, TOC @ 8755'. 2/13/19 WOC, install nightcap, RD and rig release.  14. 1 hereby certify that the foregoing is true and correct.								
, , ,	Electronic Submission #	INCORPORA	TEĎ, sent to the	Carlsbad	•			
Name (Printed/Typed) DAVID ST	EWART	,	Title REGUL	ATORY AD	/ISOR	<del> </del>		
Signature (Electronic S	ubmission) THIS SPACE FO	OR FEDERA	Date 02/22/2	<del> </del>				
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Approved By			Title Ace	cepted f	or Record	FEB. 2 7 2019		
Conditions of approval, if any, are attached ertify that the applicant holds legal or equivalent would entitle the applicant to condu	itable title to those rights in the		Office	Jonathon Carlsbad F	Shepard eld Office			
itle 18 U.S.C. Section 1001 and Title 43 States any false, fictitious or fraudulent s				willfully to ma	ke to any department or a	gency of the United		

(Instructions on page 2) \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\*

