

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD Artesia

FORM APPROVED
OMB No. 1004-0137
Expires: July 31, 2010

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Dry <input type="checkbox"/> Other		5. Lease Serial No. NMNM40659	
b. Type of Completion <input checked="" type="checkbox"/> New Well <input type="checkbox"/> Work Over <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Diff. Resvr. Other _____		6. If Indian, Allottee or Tribe Name	
2. Name of Operator OXY USA INCORPORATED		7. Unit or CA Agreement Name and No. NMNM138937	
Contact: SARAH E CHAPMAN E-Mail: SARAH_CHAPMAN@OXY.COM		8. Lease Name and Well No. IRIDIUM MDP1 28-21 FEDERAL COM 21H	
3. Address 5 GREENWAY PLAZA SUITE 110 HOUSTON, TX 77046-0521		9. API Well No. 30-015-45074-00-S1	
3a. Phone No. (include area code) Ph: 713-350-4997		10. Field and Pool, or Exploratory INGLE WELLS - BONE SPRING	
4. Location of Well (Report location clearly and in accordance with Federal requirements)* Sec 28 T23S R31E Mer NMP At surface SWSW 610FSL 648FWL 32.269856 N Lat, 103.789196 W Lon Sec 28 T23S R31E Mer NMP At top prod interval reported below SWSW 472FSL 391FWL 32.269360 N Lat, 103.790030 W Lon Sec 21 T23S R31E Mer NMP At total depth NWNW 24FNL 303FWL 32.296723 N Lat, 103.790100 W Lon		11. Sec., T., R., M., or Block and Survey or Area Sec 28 T23S R31E Mer NMP	
14. Date Spudded 07/22/2018		15. Date T.D. Reached 12/03/2018	
16. Date Completed <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod. 12/26/2018		17. Elevations (DF, KB, RT, GL)* 3368 GL	
18. Total Depth: MD 19056 TVD 8690		19. Plug Back T.D.: MD 19866 TVD 8690	
20. Depth Bridge Plug Set: MD TVD		21. Type Electric & Other Mechanical Logs Run (Submit copy of each) DUALATEROLOG&N GAMMARAY	
22. Was well cored? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Was DST run? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Directional Survey? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (Submit analysis)			

23. Casing and Liner Record (Report all strings set in well)

Hole Size	Size/Grade	Wt. (#/ft.)	Top (MD)	Bottom (MD)	Stage Cementer Depth	No. of Sk. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
17.500	13.375 J-55	54.5	0	628		862	207	0	
12.250	9.875 L-80	43.5	0	4278		1450	479	0	
8.500	7.625 L-80	26.4	0	8180		687	230	0	
6.750	5.500 P-110	20.0	0	19047		705	207	5350	

24. Tubing Record

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)

25. Producing Intervals

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) BONE SPRING	8835	18933	8835 TO 18933	0.520	1200	ACTIVE
B)						
C)						
D)						

27. Acid, Fracture, Treatment, Cement Squeeze, Etc.

Depth Interval	Amount and Type of Material
8835 TO 18933	15879444GAL SLICK WATER, 10904 GAL 15% HCL ACID W/ 19794790# SAND

28. Production - Interval A

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
12/31/2018	02/01/2019	24	→	3140.0	6292.0	3331.0			FLows FROM WELL
Choke Size	Tbg. Press. Flwg.	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
72/128	SI	890.0	→	3140	6592	3331		POW	

28a. Production - Interval B

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg.	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
	SI		→						

(See Instructions and spaces for additional data on reverse side)

ELECTRONIC SUBMISSION #457959 VERIFIED BY THE BLM WELL INFORMATION SYSTEM

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

Reclamation Due: 6/26/2019

DISTRICT # ARTESIA O.C.D.

ACCEPTED FOR RECORD

JUN 2 2019
BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE

28b. Production - Interval C

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
			→						

28c. Production - Interval D

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
			→						

29. Disposition of Gas(Sold, used for fuel, vented, etc.)
SOLD

30. Summary of Porous Zones (Include Aquifers):

Show all important zones of porosity and contents thereof: Cored intervals and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures and recoveries.

31. Formation (Log) Markers

Formation	Top	Bottom.	Descriptions, Contents, etc.	Name	Top Meas. Depth
BELL CANYON	4201	5067	OIL, GAS, WATER	RUSTLER	432
CHERRY CANYON	5068	6292	OIL, GAS, WATER	SALADO	738
BRUSHY CANYON	6293	7967	OIL, GAS, WATER	CASTILE	2689
BONE SPRING	7968	8821	OIL, GAS, WATER	DELAWARE	4172
				BELL CANYON	4201
				CHERRY CANYON	5068
				BRUSHY CANYON	6293
				BONE SPRING	7968

32. Additional remarks (include plugging procedure):

LOG HEADERS, DIRECTIONAL SURVEY, AS-DRILLED C-102 PLAT AND WBD ARE ATTACHED

33. Circle enclosed attachments:

- | | | | |
|---|--------------------|---------------|-----------------------|
| 1. Electrical/Mechanical Logs (1 full set req'd.) | 2. Geologic Report | 3. DST Report | 4. Directional Survey |
| 5. Sundry Notice for plugging and cement verification | 6. Core Analysis | 7 Other: | |

34. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records (see attached instructions):

Electronic Submission #457959 Verified by the BLM Well Information System.
For OXY USA INCORPORATED, sent to the Carlsbad
Committed to AFMSS for processing by DEBORAH HAM on 05/23/2019 (19DMH0077SE)

Name (please print) DAVID STEWARTTitle REGULATORY ADVISOR

Signature _____ (Electronic Submission)

Date 03/14/2019

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.

**** REVISED ** REVISED ** REVISED ** REVISED ** REVISED ** REVISED ** REVISED ** REVISED ****