Form 3160-5 (June 2015)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT IS DE

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

ield Office Expires:
NMNM45236 SUNDRY NOTICES AND REPORTS ON WEIDSA

| Do not use the abandoned we | is form for proposals to drill or to II. Use form 3160-3 (APD) for sucl | re-enter an A n proposals. | 6. If Indian, Allo | ottee or Tribe Name |
|--|--|-------------------------------|-----------------------------------|----------------------------------|
| SUBMIT IN TRIPLICATE - Other instructions on page 2 | | | | Agreement, Name and/or No. |
| 1. Type of Well ☐ Gas Well ☐ Other | | | | d No. P1 28-21 FEDERAL COM 4H |
| 2. Name of Operator Contact: LESLIE REEVES OXY USA INCORPORATED E-Mail: LESLIE_REEVES@OXY.COM | | | 9. API Well No. 30-015-452 | |
| 3a. Address 5 GREENWAY PLAZA SUITE HOUSTON, TX 77046-0521 | No. (include area code) 497-2492 | 10. Field and Po INGLE WE | ol or Exploratory Area LLS | |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) | | | 11. County or Parish, State | |
| Sec 33 T23S R31E NENW 24 32.267498 N Lat, 103.783287 | | EDDY COU | JNTY, NM | |
| 12. CHECK THE A | PPROPRIATE BOX(ES) TO INDIC | ATE NATURE O | F NOTICE, REPORT, OR | OTHER DATA |
| TYPE OF SUBMISSION | | ACTION | | |
| ☐ Notice of Intent | ☐ Acidize ☐ D | eepen | ☐ Production (Start/Resum | e) |
| _ | ☐ Alter Casing ☐ H | ydraulic Fracturing | □ Reclamation | ■ Well Integrity |
| Subsequent Report | ☐ Casing Repair ☐ N | ew Construction | ☐ Recomplete | Other |
| ☐ Final Abandonment Notice | | ug and Abandon | □ Temporarily Abandon | Drilling Operations |
| | ☐ Convert to Injection ☐ Pl | ug Back | ☐ Water Disposal | |
| determined that the site is ready for fi | nandonment Notices must be filed only after a inal inspection. and set @ 10619'. RIH with gas lift, | • | ng reclamation, have been compl | eted and the operator has |
| | | | RECEIVED |) į |
| | GC 12/9 Accepted for record - N | MoZD | DEC 0 3 20 | |
| 14. I hereby certify that the foregoing is | true and correct | · | | |
| | Electronic Submission #492509 verif For OXY USA INCORPOR Imitted to AFMSS for processing by Pl | RATED, sent to the | Carlsbad | |
| Name (Printed/Typed) LESLIE RI | · · · · · · · · · · · · · · · · · · · | | ATORY ADVISOR | |
| | | | | |
| Signature (Electronic S | ubmission) | Date 11/14/20 | 019 | |
| | THIS SPACE FOR FEDER | AL OR STATE | OFFICE USE | |
| Approved By | | _{Title} Accept | ed for Record | NOV 2 0 201 Date |
| Conditions of approval, if any, are attached. Approval of this notice does not warrant or ertify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon. | | | thon Shepard bad Field Office | |
| States any false, fictitious or fraudulent s | U.S.C. Section 1212, make it a crime for any | person knowingly and | willfully to make to any departme | ent or agency of the United |