

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NM OIL CONSERVATION

ARTESIA DISTRICT

FORM APPROVED
OMB NO. 1004-0135
Expires: July 31, 2010

MAR 02 2015

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.

RECEIVED

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

| | | |
|--|--|---|
| 1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other | | 5. Lease Serial No. NMNM88138 |
| 2. Name of Operator OXY USA INC. | | 6. If Indian, Allottee or Tribe Name |
| 3a. Address P.O. BOX 50250 MIDLAND, TX 79710 | | 7. If Unit or CA/Agreement, Name and/or No. |
| 3b. Phone No. (include area code) Ph: 432-685-5717 Fx: 432-685-5742 | | 8. Well Name and No. CEDAR CANYON 23 2H |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 23 T24S R29E SWSW 660FSL 660FWL 32.197340 N Lat, 103.961139 W Lon | | 9. API Well No. 30-015-41194 |
| | | 10. Field and Pool, or Exploratory CORRAL DRAW BONE SPRING |
| | | 11. County or Parish, and State EDDY COUNTY, NM |

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION |
|---|---|
| <input checked="" 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"/> Fracture Treat <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 |
| | <input type="checkbox"/> Change Plans <input type="checkbox"/> Plug and Abandon <input type="checkbox"/> Temporarily Abandon <input type="checkbox"/> Drilling Operations |
| | <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 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 shall 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 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

8/23/14 Drill 7-7/8" hole to 13437'M 8901'V 9/1/14. RIH & set 5-1/2" 17# L-80 BTC csg @ 13421'. Pump 50bbl FW spacer then cmt w/ 590sx (377bbl) PPC w/ additives @ 9.76ppg 3.46 yield followed by 770sx (227bbl) PPH w/ additives @ 13.2ppg 1.64 yield, had good returns during job, circ 55sx (35bbl) cmt to surface. ND BOP, install wellhead, test to 5000# for 15min, tested good. RD Rel Rig 9/5/14.

MD 3/2/16
Accepted for record
NMCCD

| | | |
|--|------------------------------|---|
| 14. I hereby certify that the foregoing is true and correct. Electronic Submission #263684 verified by the BLM Well Information System For OXY USA INC., sent to the Carlsbad Committed to AFMSS for processing by DEBORAH HAM on 02/25/2015 | | ACCEPTED FOR RECORD FEB 25 2015 BUREAU OF LAND MANAGEMENT CARLSBAD FIELD OFFICE |
| Name (Printed/Typed) DAVID STEWART | Title SR. REGULATORY ADVISOR | |
| Signature (Electronic Submission) | Date 09/15/2014 | |
| THIS SPACE FOR FEDERAL OR STATE OFFICE USE | | |
| Approved By _____ | Title _____ | |
| 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 _____ |

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.

** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED **