

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NMOCD
Artesia

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

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.
NMNM94651

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

8. Well Name and No.
CEDAR CANYON 28 FEDERAL 6H

9. API Well No.
30-015-43234-00-X1

10. Field and Pool, or Exploratory
PIERCE CROSSING

11. County or Parish, and State
EDDY COUNTY, NM

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
OXY USA INCORPORATED
Contact: JANA MENDIOLA
E-Mail: janalyn_mendiola@oxy.com

3a. Address
5 GREENWAY PLAZA STE 110
HOUSTON, TX 77046-0521

3b. Phone No. (include area code)
Ph: 432-685-5936
Fx: 432-685-5742

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 28 T24S R29E NESE 1820FSL 240FEL

12. CHECK 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"/> 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	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.)

10/31/15, Skid rig from Cedar Canyon 27 Federal 6H to Cedar Canyon 28 Federal 6H, RU BOP, test @ 250# low 5000# high, good test. Test intermediate casing to 4800# for 30 min, good test. Drill out DVT, RIH & tag cmt @ 2960'. Drill new formation to 8010', perform FIT test EMW=12.5ppg, 1040psi, good test. 11/03/15 Drill 6-3/4" hole to 13257'M 8605'V 11/06/15. RIH & set split csg string w/ 4-1/2" 13.5# P110 @ 13227-8839' and 5-1/2" 20# P110 csg @ 8839-0'. Pump 40BFW tuned spacer then cmt w/ 740sx (207bbt) PPC w/ additives @ 13.2ppg 1.57 yield, full returns throughout job, no cmt to surface, WOC, TOC @ 2900'. ND BOP, install wellhead & test to 5000#, good test. RD Rel Rig 11/08/15.

COAs have not been met

*LD 11/20/15
Accepted for record
NMOCD*

NM OIL CONSERVATION
ARTESIA DISTRICT

NOV 18 2015

RECEIVED

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

**Electronic Submission #323153 verified by the BLM Well Information System
For OXY USA INCORPORATED, sent to the Carlsbad
Committed to AFMSS for processing by JENNIFER SANCHEZ on 11/10/2015 (16JAS1011SE)**

Name (Printed/Typed) DAVID STEWART Title REGULATORY ADVISOR

Signature (Electronic Submission) Date 11/10/2015

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 _____

ACCEPTED FOR RECORD

NOV 18 2015

BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD 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.