

NM OIL CONSERVATION
ARTESIA DISTRICT

MAY 16 2016

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

ced 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.
NMNM104730

6. If Indian, Allottee or Tribe Name

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

RECEIVED

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

8. Well Name and No.
SUNDANCE 4 FEDERAL 1H

9. API Well No.
30-015-42368

10. Field and Pool, or Exploratory
BONE SPRING

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

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
OXY USA INC. Contact: NICK BOUTERIE
E-Mail: Nicholas_Bouterie@Oxy.com

3a. Address
5 GREENWAY PLAZA SUITE 110
HOUSTON, TX 77046

3b. Phone No. (include area code)
Ph: 713-350-4922

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 33 T23S R31E Mer NMP SESE 235FSL 500FEL

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 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 Right of Way
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<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.)

We need to build a Central Tank Battery site, connected to our currently existing Sundance 4 Federal 1H well pad. The proposed CTB pad will be 280.0 ft. by 150.0 ft., as per the attached survey plat.

This is needed for our Sundance 4-1H production.

Accepted for record - NMOCD

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

**Electronic Submission #320760 verified by the BLM Well Information System
For OXY USA INC., sent to the Carlsbad
Committed to AFMSS for processing by LINDA DENNISTON on 10/26/2015 ()**

Name (Printed/Typed) NICK BOUTERIE	Title SR. LANDMAN
Signature (Electronic Submission)	Date 10/21/2015

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By <i>[Signature]</i>	Title FIELD MANAGER	Date <i>5/9/16</i>
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 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.

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

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