

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.

OCD Artesia

5. Lease Serial No.
NMNM82993

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

7. If Unit or CA/Agreement, Name and/or No.
SRM1491

1. Type of Well

Oil Well Gas Well Other

8. Well Name and No.
GOVERNMENT U 1

2. Name of Operator

OXY USA WTP LIMITED PTNRSHIP Contact: TAYLOR STILLMAN
E-Mail: Taylor_Stillman@oxy.com

9. API Well No.
30-015-21020-00-S1

3a. Address

HOUSTON, TX 77210

3b. Phone No. (include area code)
Ph: 713-366-5945

10. Field and Pool, or Exploratory
BURTON FLAT

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Sec 22 T20S R28E SWNE 1980FNL 1980FEL

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 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	Onshore Order Variance
	<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 recomple 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 recomple 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.)

In response to OMB #1603041 and OMB #1603042, Oxy requests approval for custody transfer point, meter serial number 14042E, to be known as Facility Measurement Points (FMP) for gas on the above-mentioned battery as per discussion with Duncan Whitlock. Meter requirements meet Onshore Order #5 and API standards. Royalty to BLM will be paid off of this meter.

Facility diagram and lease map are attached.

NM OIL CONSERVATION
ARTESIA DISTRICT
JUL 25 2016
to
RECEIVED

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

**Electronic Submission #341070 verified by the BLM Well Information System
For OXY USA WTP LIMITED PTNRSHIP, sent to the Carlsbad
Committed to AFSS for processing by PRISCILLA PEREZ on 06/09/2016 (16PP1398SE)**

Name (Printed/Typed) TAYLOR STILLMAN

Title PRODUCTION ENGINEER

Signature (Electronic Submission)

Date 06/03/2016

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By DUNCAN WHITLOCK

Title TECHNICAL LPET

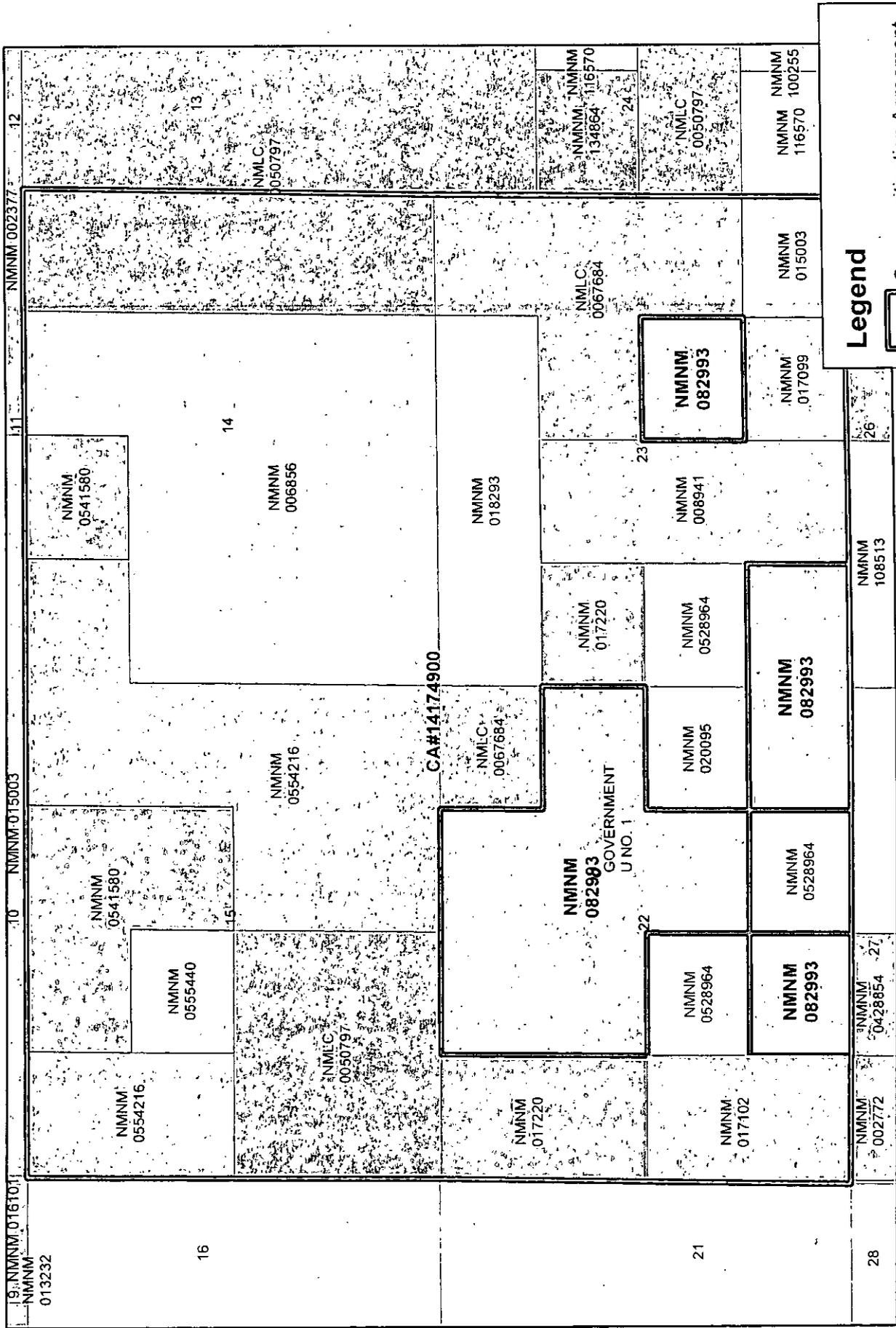
Date 07/19/2016

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

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.

Government U COM 1 NMINM 082993



Legend

-  Communitization Agreement
-  Government U1

