

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NMOC

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

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.
NMMN94651

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.
CEDAR CANYON 29 FEDERAL 21H

9. API Well No.
30-015-43601-01-S1

10. Field and Pool or Exploratory Area
PIERCE CROSSING-BONE SPRING

11. County or Parish, State
EDDY COUNTY, NM

SUBMIT IN TRIPLICATE - Other instructions on page 2

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 SUITE 110
HOUSTON, TX 77046-0521

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

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 29 T24S R29E SENE 1989FNL 150FEL
32.190086 N Lat, 103.998072 W Lon

12. CHECK THE 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 checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Deepen
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Alter Casing
	<input type="checkbox"/> Hydraulic Fracturing
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Change Plans
	<input type="checkbox"/> Plug and Abandon
	<input type="checkbox"/> Convert to Injection
	<input type="checkbox"/> Plug Back
	<input type="checkbox"/> Production (Start/Resume)
	<input type="checkbox"/> Reclamation
	<input type="checkbox"/> Recomplete
	<input type="checkbox"/> Temporarily Abandon
	<input type="checkbox"/> Water Disposal
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Well Integrity
	<input checked="" type="checkbox"/> Other Hydraulic Fracture

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 must 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 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

RUPU 3/5/17, RIH & clean out to PBD @ 13415'. 3/7/17 RIH w/ 5-1/2" 20# P110 tie back seal assembly connect to 4-1/2" 13.5# P110 liner. Pressure test csg to 9500# for 30 min, good test. RIH & perf @ 13274-13068, 13017-12812, 12761-12556, 12505-12304, 12249-12044, 11993-11791, 11737-11532, 11481-11276, 11227-11019, 10969-10764, 10717-10513, 10457-10251, 10201-9996, 9941-9740, 9689-9484, 9433-9228, 9173-8972, 8921-8719' Total 540 holes. Frac in 18 stages w/ 3752112g Slick Water + 35994g 15% HCl acid + 3205440g Linear gel w/ 7650588# sand, RD Schlumberger 3/28/17. RIH & clean out, flow to clean up and test well for potential.

NM OIL CONSERVATION
ARTESIA DISTRICT

PC 8-10-17
Accepted for record - NMOC

AUG 09 2017

RECEIVED

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

Electronic Submission #373249 verified by the BLM Well Information System
For OXY USA INCORPORATED, sent to the Carlsbad
Committed to AFSSS for processing by DEBORAH MCKINNEY on 04/20/2017 (17DLM1414SE)

Name (Printed/Typed) DAVID STEWART Title REGULATORY ADVISOR

Signature (Electronic Submission) Date 04/19/2017

THIS SPACE FOR FEDERAL OR STATE OFFICE USE
ACCEPTED FOR RECORD

Approved By (ORIG, SCD) DAVID E. GLASS Title _____ Date _____

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.

Signature DAVID E. GLASS 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.

(Instructions on page 2)

**** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ****