

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTFORM 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.*Lease Serial No.  
NMNM53229**SUBMIT IN TRIPLICATE - Other instructions on page 2**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		6. If Indian, Allottee or Tribe Name
2. Name of Operator OXY USA INCORPORATED		7. If Unit or CA/Agreement, Name and/or No.
Contact: JANA MENDIOLA E-Mail: janalyn_mendiola@oxy.com		8. Well Name and No. CEDAR CANYON 29 FEDERAL COM 25H
3a. Address 5 GREENWAY PLAZA SUITE 110 HOUSTON, TX 77046-0521	3b. Phone No. (include area code) Ph: 432-685-5936	9. API Well No. 30-015-44522-00-X1
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 29 T24S R29E NWSW 1640FSL 420FWL 32.185645 N Lat, 104.013802 W Lon		10. Field and Pool or Exploratory Area PIERCE CROSSING
		11. County or Parish, State EDDY COUNTY, NM

**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 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"/> Hydraulic Fracturing	<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	Hydraulic Fracture
	<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 recomplate 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 1/18/18, RIH & clean out to PBDT @ 13262', pressure test csg to 9800# for 30 min, good test. RIH & perf @ 13170-12994, 12969-12793, 12768-12592, 12567-12391, 12366-12190, 12165-11989, 11964-11788, 11763-11587, 11562-11386, 11361-11185, 11160-10984, 10959-10783, 10758-10582, 10557-10381, 10356-10180, 10155-9979, 9954-9778, 9753-9577, 9552-9376, 9351-9175, 9150-8974, 8949-8773, 8748-8575' Total 920 holes. Frac in 23 stages w/ 5473650g Slick Water + 22974g 7.5% HCl acid w/ 6943923# sand, RD Schlumberger 1/29/18. RIH & clean out, flow to clean up and test well for potential.

RECEIVED

MAY 23 2018

DISTRICT II-ARTESIA O.C.D.

GC 5-24-18  
Accepted for record - NMOC

14. I hereby certify that the foregoing is true and correct.	
Electronic Submission #413563 verified by the BLM Well Information System For OXY USA INCORPORATED, sent to the Carlsbad Committed to AFMSS for processing by PRISCILLA PEREZ on 05/15/2018 (18PP1711SE)	
Name (Printed/Typed) DAVID STEWART	Title REGULATORY ADVISOR
Signature (Electronic Submission)	Date 05/03/2018

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved By _____	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.	Office _____	MAY 15 2018
Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and with intent to make a false statement or representation 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 \*\***