

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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.
NMNM63757

6. If Indian, Allottee or Tribe Name

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

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		8. Well Name and No. PATTON MDP1 17 FEDERAL 1H
2. Name of Operator OXY USA INC. Contact: SARAH MITCHELL E-Mail: sarah_mitchell@oxy.com		9. API Well No. 30-015-44459
3a. Address P.O. BOX 50250 MIDLAND, TX 79710	3b. Phone No. (include area code) Ph: 432-699-4318	10. Field and Pool or Exploratory Area COTTON DRAW; BONE SPRING
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 8 T24S R31E Mer NMP SWSW 170FSL 846FWL 32.225060 N Lat, 103.805654 W Lon		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 Drilling Operations
	<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 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.

1/31/18 NU BOP, test @ 250 psi low, 5000 psi high, good test. RIH & tag cmt @ 4349', drill new formation to 4420', perform FIT EMW = 10.5 PPG. Drill 8-1/2" hole to 15025'M 9996'V (2/8/18). RIH w/ 5-1/2" 20# P-110 DQX csg and set @ 15011', pump 50 BBLs spacer then cmt w/ 235 sks (70 BBLs) PPC w/ additives, 13.2 PPG, 1.68 yield, followed by 1020 sks (302 BBLs) PPC w/ additives, 13.2 PPG, 1.67 yield. Estimated TOC = 5420'. For second stage, performed Bradenhead squeeze, pumping 10 BBLs tuned spacer, then cementing w/ 910 sks (303 BBLs) PPC w/ additives, 12.9 PPG, 1.87 yield. Ran echometer, TOC = 514'. ND BOP, install night cap, release rig (2/9/18).

OC 4-4-18
Accepted for record - NMOCD

WATER OIL CONSERVATION
ARTESIA DISTRICT
APR 03 2018

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

Electronic Submission #407124 verified by the BLM Well Information System
For OXY USA INC., sent to the Carlsbad
Committed to AFMSS for processing by JENNIFER SANCHEZ on 03/12/2018 ()

Name (Printed/Typed) DAVID STEWART Title SR. REGULATORY ADVISOR

Signature (Electronic Submission) Date 03/08/2018

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____ Title _____ Date 2018

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 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.

(Instructions on page 2)

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