

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.  
NMNM94651

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  
☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator  
OXY USA INC.  
Contact: JANA MENDIOLA  
E-Mail: janalyn\_mendiola@oxy.com

3a. Address  
P.O. BOX 50250  
MIDLAND, TX 79710

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

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
Sec 17 T24S R29E Mer NMP SENW 2409FNL 1352FWL  
32.218318 N Lat, 104.010768 W Lon

10. Field and Pool or Exploratory Area  
CORRAL DRAW, BONE SPRING

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 recompleat 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 recompleat 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.

OXY USA Inc. respectfully requests to make the following corrections to the drilling operations sundry filed on 7/23/2018 (EC Transaction #428218, Serial Number 950-832) to reflect the correct production casing setting depths as follows:

4-1/2" 13.5# P110 csg set @ 16278-8626' and 5-1/2" 20# P110 csg set @ 8626-0'

**NM OIL CONSERVATION  
ARTESIA DISTRICT**

Accepted For Record

NMOCD

SEP 06 2018  
9.6.2018

SEP 06 2018

RECEIVED

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

Electronic Submission #434122 verified by the BLM Well Information System  
For OXY USA INC., sent to the Carlsbad

Name (Printed/Typed) DAVID STEWART

Title SR REGULATORY ADVISOR

Signature (Electronic Submission)

Date 09/06/2018

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

Approved By

Title

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

Pending BLM approvals will  
subsequently be reviewed  
and scanned

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowing States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

any department or agency of the United States

(Instructions on page 2)

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