

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
Carlsbad Field Office
OCSD Artesia

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.

3. Lease Serial No.
NMNM0545035

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

8. Well Name and No.
PURE GOLD MDP1 29-17 FED COM 1H

1. Type of Well
 Oil Well Gas Well Other

9. API Well No.
30-015-45645-00-X1

2. Name of Operator
OXY USA INCORPORATED
Contact: SARAH E CHAPMAN
E-Mail: SARAH_CHAPMAN@OXY.COM

3a. Address
5 GREENWAY PLAZA SUITE 110
HOUSTON, TX 77046-0521

3b. Phone No. (include area code)
Ph: 713-350-4997

10. Field and Pool or Exploratory Area
INGLE WELLS

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 29 T23S R31E SWSW 690FSL 920FWL
32.270073 N Lat, 103.805382 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.

4/18/19 NU BOP, test to 5000# high 250# low, good test. RIH & test 9-5/8" csg to 1500# for 30 minutes, good test. RIH & drill new formation 4216', perform FIT test to EMW=15.1 1500#, good test. Drill 8-1/2" hole to 9231'. RIH & set 7-5/8" 26.4# HCL-80 FJ/SF csg @ 9216', pump 40bbl FWS, then cmt w/ 155sxs (40bbl) class C w/ additives 12.9ppg 1.43 yield. Wait 2 hours then pump 2nd stage w/ 401sxs (134bbl) class C w/ additives 12.9ppg 1.92 yield. Ran echometer, cmt to surface. 4/25/19 ND BOP, install nightcap, RD and rig release.

GC 6/25/19
Accepted for record - NMOCD

RECEIVED

5/14/19 NU BOP, test to 5000# high 250# low, good test. RIH & test 7-5/8" csg to 1500# for 30 minutes, good test. RIH & drill new formation to 9241', perform FIT test to EMW=14.5ppg 1018#, good test. Drill 6-3/4" hole to 10038'V/23106'M. RIH & set 5-1/2" 20# P-110 SF TORQ csg @ 23076', pump 130bbl tune spacer then cmt w/ 1005sxs (258sxs) class H w/ additives 13.2ppg 1.44 yield. Full returns throughout job, TOC @ ~8700'. 5/26/19 ND BOP, install night cap, RD and rig release.

JUN 25 2019

DISTRICT II-ARTESIA O.C.D

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

**Electronic Submission #468423 verified by the BLM Well Information System
For OXY USA INCORPORATED, sent to the Carlsbad
Committed to AFMSS for processing by PRISCILLA PEREZ on 06/11/2019 (19PP23655E)**

Name (Printed/Typed) SARAH E CHAPMAN

Title REGULATORY SPECIALIST

Signature (Electronic Submission)

Date 06/11/2019

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____

Title **Accepted for Record**

JUN 15 2019
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 **Jonathon Shepard
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)

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