

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.*

**Carlsbad Field Office**  
**MOCD Artesia**

Serial No.  
NMNM13996

**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		7. If Unit or CA/Agreement, Name and/or No.
2. Name of Operator OXY USA INCORPORATED		8. Well Name and No. LENGTH CC 6_7 FEDERAL COM 23H
3a. Address 5 GREENWAY PLAZA SUITE 110 HOUSTON, TX 77046-0521		9. API Well No. 30-015-45551-00-X1
3b. Phone No. (include area code) Ph: 432-685-5936		10. Field and Pool or Exploratory Area PIERCE CROSSING-BONE SPRING
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 6 T24S R29E 230FNL 2320FWL 32.253132 N Lat, 104.024727 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.

3/25/19 RU BOP, test @ 250# low 5000# high, test 10-3/4" casing to 1500# for 30 min, good test. RIH & drill new formation to 440', perform FIT test to EMW=18.3ppg, 174psi, good test. 3/25/19 drill 9-7/8" hole to 7723', 3/27/19. RIH & set 7-5/8" 26.4# L-80 csg @ 7723', pump 80bbl mud push spacer then cmt w/ 593sx (208bbl) Class H w/ additives 12ppg 1.97 yield followed by 354sx (102bbl) Class H w/ additives 13.2ppg 1.6 yield. Bradenhead squeeze 2nd stage w/ 10bbl mud push spacer then cmt w/ 340sx (114bbl) Class H w/ additives 12.8ppg 1.6 yield, followed by 290sx (90bbl) Class H w/ additives 12.8ppg 1.76 yield, followed by 290sx (90bbl) Class H w/ additives 12.8ppg 1.76 yield, cmt to surface, WOC. 3/29/19 ND BOP, install wellhead cap & release rig.

RECEIVED

JUL 28 2019

GC 7/24/19  
Accepted for record - NMOCD

DISTRICT/ARTESIA O.C.D.

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

Electronic Submission #465409 verified by the BLM Well Information System  
For OXY USA INCORPORATED, sent to the Carlsbad  
Committed to AFMSS for processing by PRISCILLA PEREZ on 05/14/2019 (19PP2113SE)

Name (Printed/Typed) JANA MENDIOLA	Title REGULATORY SPECIALIST
Signature (Electronic Submission)	Date 05/14/2019

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____	Title <b>Accepted for Record</b>	Date <b>MAY 14 2019</b>
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 <b>Jonathon Shepard Carlsbad Field Office</b>	

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 \*\***