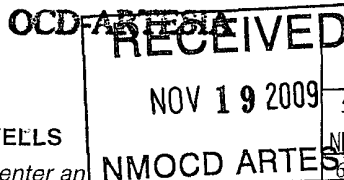


UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT



FORM APPROVED
OMB NO. 1004-0135
Expires: November 30, 2000

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.

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

OXY USA Inc.

16696

3a. Address

P.O. Box 50250, Midland, TX 79710-0250

3b. Phone No. (include area code)

432-685-5717

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

330FWL 2510FWL NEWW(C) Sec 29 T23S R31E

5. Lease Serial No.

NMNM0545035

6. Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or N

8. Well Name and No.

Federal 29 #1

9. API Well No.

30-015- 37330

10. Field and Pool, or Exploratory Area

Sand Dunes Delaware, West

11. County or Parish, State

Eddy NM

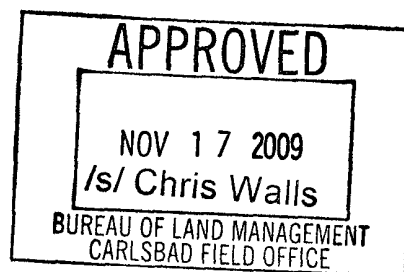
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" 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 type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<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 <u>Amend</u>
	<input checked="" type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	<u>Intermediate/Prod</u>
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	<u>Casing & Cementing</u>

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 shall 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 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the final site is ready for final inspection.)

See attached.

**SEE ATTACHED FOR
CONDITIONS OF APPROVAL**



14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

David Stewart

Title

Sr. Regulatory Analyst

Date

11/9/09

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

Title 18 U.S.C. Section 1001, and Title 43 U.S.C. Section 1212, makes 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.

OXY USA Inc.
Federal 29 # 1
API No. 30-015-37330

1. Cementing Program (Changes from Original APD):

Intermediate Interval

Interval	Amount sx	Ft of Fill	Type	Gal/Sx	PPG	Ft3/sx
Intermediate (TOC: 0' - Surface)						
Lead: 0' - 3521' (150% Excess)	930	3521'	Halliburton Light Premium Plus + 5 pps Salt + 5 pps Gilsonite + 0.125 pps Poly-E-Flake	9.57	12.9	1.88
Tail: 3521' - 4000' (150% Excess)	200	479'	Halliburton Premium Plus + 1% WellLife 734	6.38	14.8	1.34

Production Interval

Interval	Amount sx	Ft of Fill	Type	Gal/Sx	PPG	Ft3/sx
Production (TOC: 5,900') 1st Stage						
Lead: 5,900' - 8,300' (100% Excess)	540	2,400'	Halliburton Super H + 5 pps Gilsonite + 1 pps Salt + 0.5% Halad-344 + 0.4% CFR-3 + 0.3% HR-800	7.89	13.2	1.62
Two Stage DV Tool @ 5,900'						
Production (TOC: 4,050') 2nd Stage						
Lead: 4,050' - 5,900' (200% Excess)	600	1850'	Halliburton Super H + 0.5 % Halad-344 + 0.4% CFR-3 + 5 pps Gilsonite + 1pps Salt	7.88	13.2	1.62
Pack Off Stage Tool (P.O.S.T) @ 4,050'						
Production (TOC: Surface) 3rd Stage						
Lead: 0' - 3,554' (35% Excess)	430	3,554'	Halliburton Light Premium Plus.	11.29	12.4	2.01
Tail: 3,554' - 4,050' (35% Excess)	100	496'	Halliburton Premium Plus Cement	6.34	14.8	1.33

Cement Summary:

Casing	Hole Size	Interval	TOC	Comp.Strength (24 hrs)
8 5/8" 32# J55 LTC	10 5/8"	0' - ^{4000'} 4220'	Per Operator 11/17/09 CRW Surface	650 psi Lead 1343 psi Tail
5 1/2" 17# J-55, LTC	7 7/8"	0' - 8,300'	Surface	560 psi Lead 1536 psi Tail

CONDITIONS OF APPROVAL

OPERATOR'S NAME:	OXY USA, Inc.
LEASE NO.:	NMNM-0545035
WELL NAME & NO.:	Federal 29 #1
SURFACE HOLE FOOTAGE:	330' FNL & 2510' FWL (C)
LOCATION:	Surface : Section 29, T. 23 S., R 31 E., NMPM
COUNTY:	Eddy County, New Mexico

The pack off stage tool should be placed a minimum of 50 feet below the intermediate casing shoe.

1. The minimum required fill of cement behind the **5-1/2** inch production casing is:

a. First stage to DV tool, cement shall:

☒ Cement to circulate. If cement does not circulate, contact the appropriate BLM office, before proceeding with second stage cement job.

b. Second stage above DV tool, cement shall:

☒ Cement to circulate. If cement does not circulate, contact the appropriate BLM office, before proceeding with third stage cement job.

c. Third stage above pack off stage tool, cement shall:

☒ Cement to surface. If cement does not circulate, contact the appropriate BLM office.

CRW 111309