



UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OCD Artesia

FORM APPROVED  
OM B No. 1004-0137  
Expires March 31, 2007

**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.**

3a. Address  
**4008 N. Grimes, PMB 269, Hobbs NM 88240**

3b. Phone No. (include area code)  
**575-397-8210**

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

**Sec 33 T23s R29e SESE**

5. Lease Serial No.  
**NM19848**

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.  
**Cypress 33 Federal #1H**

9. API Well No.  
**3001536321**

10. Field and Pool, or Exploratory Area

11. County or Parish, State  
**Eddy**

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 type="checkbox"/> Other
	<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 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 site is ready for final inspection.)

All Reclamation activities at this site have been completed as per BLM requirements and NOI#10-JA-085W has been satisfied.

See attached NOI for further.



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

**Dusty L. Wilson**

Title **HES Specialist**

Signature

Date

**7/27/2010**

**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 USC Section 1001 and Title 43 USC 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)

0102/6/8  
AD

*BLM Copy*

Number 10-JA-084W

Page of

☒ Certified Mail - Return  
Receipt Requested  
70083230000209874038

**UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT  
NOTICE OF WRITTEN ORDER**

IDENTIFICATION	
IID	
Lease	NMNM19848
CA	
Unit	
PA	

Bureau of Land Management Office <b>CARLSBAD FIELD OFFICE</b>	Operator <b>OXY USA INC</b>
Address <b>620 E GREENE STREET CARLSBAD NM 88220</b>	Address <b>P O BOX 27757 HOUSTON TX 77227</b>
Telephone <b>575-234-5909</b>	Attention
Inspector <b>AMOS</b>	Attn Addr

Site Name <b>CYPRESS 33 FEDERAL</b>	Well or Facility <b>1H</b>	1/4 1/4 Section <b>SESE 33</b>	Township <b>23S</b>	Range <b>29E</b>	Meridian <b>NMP</b>	County <b>EDDY</b>	State <b>NM</b>
Site Name	Well or Facility	1/4 1/4 Section	Township	Range	Meridian	County	State
Site Name	Well or Facility	1/4 1/4 Section	Township	Range	Meridian	County	State

The following condition(s) were found by Bureau of Land Management Inspectors on the date and at the site(s) listed above.

Date	Time (24-hour clock)	Corrective Action to be Completed by	Date Corrected	Authority Reference
04/12/2010	07:45	06/12/2010		43 CFR 3162 1 a, Onshore Order 1.XII B

**Remarks**

Interim Reclamation was not adequate. The slopes were left smooth, recent rains are causing erosion channels. Slopes are to be ripped across the slope with erosion controls every 20' going across the slope. The area below the tanks where the flowlines are located should also have erosion controls. Seed all disturbed areas with seed mix #3. Contact Jim Amos @ 575-234-5909 if any questions.

When the Written Order is complied with, sign this notice and return to above address.

Company Representative Title HES Specialist Signature [Signature] Date 7/27/10

Company Comments Completed + Ready for Inspection, as per discussion + Agreements with Jim Amos.

**Warning**

The Authorized Officer has authority to issue a Written Order in accordance with 43 CFR 3161.2. Written Order correction and reporting time frames begin upon receipt of this Notice or 7 business days after the date it is mailed, whichever is earlier. Each stipulation must be corrected within the prescribed time from receipt of this Notice and reported to the Bureau of Land Management Office at the address shown above. If you do not comply as noted above under "Corrective Action to be Completed By", you shall be issued an Incident of Noncompliance (INC) in accordance with 43 CFR 3163.1(a). Failure to comply with the INC may result in assessments as outlined in 43 CFR 3163.1 and may also incur civil penalties (43 CFR 3163.2). All self-certified corrections must be postmarked no later than the next business day after the prescribed time frame for correction.

Section 109(d)(1) of the Federal Oil and Gas Royalty Management Act of 1982, as implemented by the applicable provisions of the operating regulations at Title 43 CFR 3163.2(f)(1), provides that any person who "knowingly or willfully" prepares, maintains, or submits false, inaccurate, or misleading reports, notices, affidavits, records, data, or other written information required by this part shall be liable for a civil penalty of up to \$25,000 per violation for each day such violation continues, not to exceed a maximum of 20 days.

**Review and Appeal Rights**

A person contesting a decision shall request a State Director review of the Written Order. This request must be filed within 20 working days of receipt of the Notice with the appropriate State Director (see 43 CFR 3165.3). The State Director review decision may be appealed to the Interior Board of Land Appeals, 801 North Quincy Street, Suite 300, Arlington, VA 22203 (see 43 CFR 3165.4). Contact the above listed Bureau of Land Management office for further information.

Signature of Bureau of Land Management Authorized Officer <u>[Signature]</u>	Date <u>4-12-10</u>	Time <u>07:45</u>
<b>FOR OFFICE USE ONLY</b>		
Number <u>3</u>	Date	Type of Inspection <u>ES</u>