

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB NO. 1004-0135
Expires: July 31, 2010

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.

MMOCD Copy

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM109758
2. Name of Operator OXY USA INC. / Contact: JANA MENDIOLA E-Mail: janalyn_mendiola@oxy.com		6. If Indian, Allottee or Tribe Name
3a. Address P.O. BOX 50250 MIDLAND, TX 79710	3b. Phone No. (include area code) Ph: 432-685-5936 Fx: 432-685-5742	7. If Unit or CA/Agreement, Name and/or No. SPEAK EASY FEDERAL UNIT 4H
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 1 T22S R32E SWNW 1980FNL 330FWL 32.422523 N Lat, 103.635391 W Lon		9. API Well No. 30-025-42266
		10. Field and Pool, or Exploratory RED TANK BONE SPRING
		11. County or Parish, and State LEA COUNTY, NM

APR 15 2015

RECEIVED

12. CHECK 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"/> 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
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Drilling Operations
	<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 shall 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 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.)

Spud 14-3/4" hole 12/26/14, drill to 1090' 12/27/14. RIH & set 11-3/4" 47# J-55 BTC csg @ 1088', pump 30BFW spacer then pump 510sx (157bbl) PPC w/ additives 13.5ppg 1.73 yield followed by 270sx (64bbl) PPC w/ additives 14.8ppg 1.33 yield, circ 399sx (123bbl) cmt to surface, full returns throughout job, WOC. 12/28/14, Install WH, test to 1100#, test passed. 12/29/14 RU BOP, test @ 250# low 5000# high, good test. Test csg to 2150# for 30min, test passed. RIH & tag cmt @ 1038', drill new formation to 1100', perform FIT test to EMW=13.5ppg, 228psi, good test.

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

**Electronic Submission #286676 verified by the BLM Well Information System
For OXY USA INC., sent to the Hobbs
Committed to AFMSS for processing by LINDA JIMENEZ on 04/13/2015 ()**

Name (Printed/Typed) DAVID STEWART	Title SR. REGULATORY ADVISOR
Signature (Electronic Submission)	Date 12/31/2014

ACCEPTED FOR RECORD

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____	Title _____	APR 14 2015
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 _____	BUREAU OF LAND MANAGEMENT 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.

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

APR 22 2015