Form 3160-5 (August 2007)	DEPARTMENT OF THE INTERIOR			FORM APPROVED OMB NO. 1004-0135 Expires: July 31, 2010	
SUNDF	SUNDRY NOTICES AND REPORTS ON WELLS		SOCD 5. Lease Serial No NMNM1073	5. Lease Serial No. NMNM107395	
Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals T 1 4 2015			4 2015 6. If Indian, Allot	6. If Indian, Allottee or Tribe Name	
	RIPLICATE - Other instruc			Agreement, Name and/or No.	
1. Type of Well		RECE	EVED 8. Well Name and	No	
S Oil Well Gas Well	Other			29 FEDERAL 4H	
2. Name of Operator OXY USA INC Contact: JENNIFER A DUARTE E-Mail: jennifer_duarte@oxy.com			9. API Well No. 30-025-4182	9. API Well No. 30-025-41827	
3a. Address PO BOX 4294 HOUSTON, TX 77210		3b. Phone No. (include area code)10. Field and Pool, or ExploratorPh: 713-513-6640TRIPLE X BONE SPRIN		I, or Exploratory ONE SPRING	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)			11. County or Par	11. County or Parish, and State	
Sec 29 T23S R33E NWNW 340FNL 980FWL			LEA COUNT	LEA COUNTY, NM	
12. CHECK AJ	PROPRIATE BOX(ES) TO	INDICATE NATURE OF	NOTICE, REPORT, OR OT	HER DATA	
TYPE OF SUBMISSION		TYPE O	F ACTION		
□ Notice of Intent	Acidize	Deepen	Production (Start/Resume	) Water Shut-Off	
	Alter Casing	Fracture Treat	Reclamation	□ Well Integrity	
Subsequent Report	Casing Repair	New Construction	Recomplete	Other Site Facility Diagra	
Final Abandonment Notice	Change Plans	Plug and Abandon Plug Back	<ul> <li>Temporarily Abandon</li> <li>Water Disposal</li> </ul>	m/Security Plan	
testing has been completed. Final determined that the site is ready for Please see the attached sit This is for buried flowlines of February 25, 2015 at appro	Abandonment Notices shall be file or final inspection.) e security diagram for your u on the was kept on lease that	d only after all requirements, inclu se and review. t was verbally approved by S	completion in a new interval, a Form ding reclamation, have been complet Steve Caffey on	ed, and the operator has	
If you need any additional in 14. I hereby certify that the foregoin	g is true and correct. Electronic Submission #2	96589 verified by the BLM We			
14. I hereby certify that the foregoin	g is true and correct. Electronic Submission #2 For O	196589 verified by the BLM We XY USA INC, sent to the Hob or processing by LINDA JIMEI	bs		
14. I hereby certify that the foregoin	g is true and correct. Electronic Submission #2 For O Committed to AFMSS for	196589 verified by the BLM We XY USA INC, sent to the Hob or processing by LINDA JIMEI	bs NEZ on 08/19/2015 ()		
14. I hereby certify that the foregoin Name(Printed/Typed) JENNIF	g is true and correct. Electronic Submission #2 For O Committed to AFMSS for ER A DUARTE ic Submission)	96589 verified by the BLM Wo XY USA INC, sent to the Hob or processing by LINDA JIME Title REGU Date 03/30/2	bs NEZ on 08/19/2015 () LATORY SPECIALIST		
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14. I hereby certify that the foregoin Name(Printed/Typed) JENNIF	g is true and correct. Electronic Submission #2 For O Committed to AFMSS for ER A DUARTE ic Submission) THIS SPACE FO	96589 verified by the BLM Wo XY USA INC, sent to the Hob or processing by LINDA JIME Title REGU Date 03/30/2	bs NEZ on 08/19/2015 () LATORY SPECIALIST 2015 OFFICE USE	9/29/15 Date	

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

OCT 1 5 2015

