

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 NMOCD
Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals. **Hobbs**

5. Lease Serial No.
NMNM0175774

6. If Indian, Allottee or Tribe Name

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

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
 OCCIDENTAL PERMIAN LP Contact: JENNIFER A DUARTE
 E-Mail: jennifer_duarte@oxy.com

3a. Address
 MIDLAND, TX 79710

3b. Phone No. (include area code)
 Ph: 713-513-6640

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
 Sec 28 T19S R32E SWSE 652FSL 2425FEL

8. Well Name and No.
 LUSK 28 WEST FEDERAL COM 1H

9. API Well No.
 30-025-41257-00-S1

10. Field and Pool, or Exploratory
 LUSK

11. County or Parish, and State
 LEA COUNTY, NM

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	Venting and/or Flaring
	<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.)

OCCIDENTAL PERMIAN LTD respectfully reports that the above location ended the 90 days of flaring from February 29, 2016 to May 29, 2016; due to DCP - ZIA plant trouble.

February 2016 - 108 mcf
 March 2016 - 1029 mcf
 April 2016 - 0 mcf
 May 2016 - 0 mcf

HOBBS OCD
 JUL 06 2016
 RECEIVED

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

**Electronic Submission #340702 verified by the BLM Well Information System
 For OCCIDENTAL PERMIAN LP, sent to the Hobbs
 Committed to AFMSS for processing by PRISCILLA PEREZ on 06/01/2016 (16PP0520SE)**

Name (Printed/Typed) JENNIFER A DUARTE Title REGULATORY SPECIALIST

Signature (Electronic Submission) Date 05/31/2016

ACCEPTED FOR RECORD
 JUN 27 2016
 BUREAU OF LAND MANAGEMENT
 CARLSBAD FIELD OFFICE

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, 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.

**** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ****

Accepted for Record Only
 MAB/OCD 7/9/2016