

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NMOCD
Hobbs

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.

5. Lease Serial No.
NMNM106696

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.
NMNM126140X

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

HOBBS OCD

AUG 03 2016

RECEIVED

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		8. Well Name and No. SPEAK EASY FEDERAL UNIT 5H	
2. Name of Operator OXY USA INCORPORATED		9. API Well No. 30-025-42267-00-S1	
3a. Address P O BOX 4294 HOUSTON, TX 77210-4294		10. Field and Pool, or Exploratory BOOTLEG RIDGE	
3b. Phone No. (include area code) Ph: 432-685-5717 Fx: 432-685-5742		11. County or Parish, and State LEA COUNTY, NM	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 1 T22S R32E Lot 4 660FNL 330FWL 32.426151 N Lat, 103.635389 W Lon			

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 Workover Operations
	<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 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.)

isolating water zones per David Stewart

- MIRU WO Rig.
- ND WH and NU BOP
- Kill well as needed and POOH w/ 2-7/8" and ESP. Send ESP to Baker Hughes for inspection.
- PU 4-3/4" bit. Cleanout to 10,280'. TOH.
- PU CIBP and set at 10,220'.
- PU production tubing and RIH w/ ESP as follows:
- RIH w/ ESP to (bottom of ESP assembly) 7540'. Max RIH speed of 60 ft/minute.
- Make wellhead connection with ESP cable.
- ND BOP & NU WH.
- RD and MO WO rig.
- Ensure the well is lined up to the battery prior to start up.
- Start ESP up at 45 Hz the day after work is completed. NOTE: Call Oxy ESP Tech, prior to

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

**Electronic Submission #344072 verified by the BLM Well Information System
For OXY USA INCORPORATED, sent to the Hobbs
Committed to AFMSS for processing by PRISCILLA PEREZ on 07/07/2016 (16PP0869SE)**

Name (Printed/Typed) DAVID STEWART	Title SR. REGULATORY ADVISOR
Signature (Electronic Submission)	Date 07/07/2016

THIS SPACE FOR FEDERAL OR STATE OFFICE USE 26/2016

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 ****

*MSS/OCD
8/11/2016*

Additional data for EC transaction #344072 that would not fit on the form

32. Additional remarks, continued

startup to allow him to be present on location during start up.

13. Well must be put on test after well has stabilized (72 hrs.) to evaluate pump performance.

14. The supply voltage and currents in all three phases should remain within 5% of each other. Unbalanced currents or voltages may indicate a faulty power supply, motor, or cable. If severely unbalanced conditions are observed at start-up the system should be shut down within a few seconds to prevent damage.

15. Amperage setting to be set on underload at 85% of the normal operating current (above idle motor load). The overload set at 110% of the normal operating current to account for initial clean-up of heavy fluid. ESP technician to remain on location until ESP surfaces fluid and stabilized rate is achieved. Pump up time should be no more than approximately 90 minutes maximum.

16. Gradually increase operating frequency from 45 Hz. Avoid high step changes in frequency. Return well to production.