

District I
1625 N. French Dr., Hobbs, NM 88240

District II
811 S. First St., Artesia, NM 88210

District III
1000 Rio Brazos Rd., Aztec, NM 87410

District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals & Natural Resources

Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-104
Revised August 1, 2011

Submit one copy to appropriate District Office

AMENDED REPORT

HOBS OGD
RECEIVED
JUL 27 2018

I. REQUEST FOR ALLOWABLE AUTHORIZATION TO TRANSPORT

| | | |
|---|---|--|
| ¹ Operator name and Address OXY USA INC. P.O. BOX 4294 HOUSTON, TX 77210 | | ² OGRID Number 16696 |
| ⁴ API Number 30-025-44194 | | ³ Reason for Filing Code/ Effective Date - NW |
| ⁵ Pool Name MESA VERDE; BONE SPRING | ⁶ Pool Code 96229 | |
| ⁷ Property Code: 320828 | ⁸ Property Name: MESA VERDE BONE SPRING UNIT | ⁹ Well Number: 9H |

II. ¹⁰ Surface Location

| Ul or lot no. | Section | Township | Range | Lot Idn | Feet from the | North/South Line | Feet from the | East/West line | County |
|---------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|--------|
| M | 17 | 24S | 32E | | 280 | SOUTH | 1116 | WEST | LEA |

¹¹ Bottom Hole Location Top Perf- 362' FSL 442' FWL Bottom Perf- 397' FNL 277' FEL

| UL or lot no. | Section | Township | Range | Lot Idn | Feet from the | North/South line | Feet from the | East/West line | County |
|---------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|--------|
| D | 8 | 24S | 32E | | 203 | NORTH | 279 | WEST | LEA |

| | | | | | |
|-----------------------------|---|--|-----------------------------------|------------------------------------|-------------------------------------|
| ¹² Lse Code F | ¹³ Producing Method Code: P | ¹⁴ Gas Connection Date: 04/26/18 | ¹⁵ C-129 Permit Number | ¹⁶ C-129 Effective Date | ¹⁷ C-129 Expiration Date |
|-----------------------------|---|--|-----------------------------------|------------------------------------|-------------------------------------|

III. Oil and Gas Transporters

| ¹⁸ Transporter OGRID | ¹⁹ Transporter Name and Address | ²⁰ O/G/W |
|---------------------------------|--|---------------------|
| | GREAT LAKES PETROLEUM TRANSPORTATION, LLC | O |
| 151618 | ENTERPRISE FIELD SERVICES LLC | G |

IV. Well Completion Data

| | | | | | |
|------------------------------------|--------------------------------------|-------------------------------------|---------------------------------------|---|-----------------------|
| ²¹ Spud Date 1/22/18 | ²² Ready Date 04/26/18 | ²³ TD 20504'M/10392'V | ²⁴ PBDT 20442'M/10392'V | ²⁵ Perforations 10475-20310 | ²⁶ DHC, MC |
| ²⁷ Hole Size | ²⁸ Casing & Tubing Size | ²⁹ Depth Set | ³⁰ Sacks Cement | | |
| 17-1/2" | 13-3/8" | 952' | 1230 | | |
| 12-1/4" | 9-5/8" | 4717' | 1430 | | |
| 8-1/2" | 5-1/2" | 20489' | 3048 | | |

V. Well Test Data

| | | | | | |
|--|---|-------------------------------------|---------------------------------------|-----------------------------|--------------------------------------|
| ³¹ Date New Oil 04/27/18 | ³² Gas Delivery Date 04/26/18 | ³³ Test Date 05/12/18 | ³⁴ Test Length 24 hours | ³⁵ Tbg. Pressure | ³⁶ Csg. Pressure 1070 |
| ³⁷ Choke Size 64/184 | ³⁸ Oil 3021 | ³⁹ Water 9919 | ⁴⁰ Gas 4152 | | ⁴¹ Test Method FLOWING |

⁴² I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature: Sarah Chapman

Printed name:
SARAH CHAPMAN

Title:
REGULATORY SPECIALIST

E-mail Address:
sarah_chapman@oxy.com

Date: 07/25/18 Phone: 713-350-4997

OIL CONSERVATION DIVISION

Approved by: Karen Sharp

Title: Staff Mgr

Approval Date: 8-2-18

Documents pending BLM approvals will subsequently be reviewed and scanned

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 2018

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.
NMNM66925

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2

7. If Unit or CA/Agreement, Name and/or No.
NMNM137096X

8. Well Name and No.
MESA VERDE BS UNIT 9H

9. API Well No.
30-025-44194

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
OXY USA INC
Contact: SARAH CHAPMAN
E-Mail: SARAH_CHAPMAN@OXY.COM

3a. Address
P.O. BOX 4294
HOUSTON, TX 77210
3b. Phone No. (include area code)
Ph: 713-350-4997

10. Field and Pool or Exploratory Area
MESA VERDE BONE SPRING

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 17 T24S R32E SWSW 280FSL 1116FWL
32.210960 N Lat, 103.701683 W Lon

11. County or Parish, State
LEA COUNTY, NM

12. CHECK THE 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"/> Hydraulic Fracturing | <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 | |
| | <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 recomplate 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 must 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 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

RUPU 4/6/18, RIH & clean out to PBTD @ 20442'. Pressure test csg to 9800# for 30 min, good test. RIH & perf @ 20310-20208, 20151-20003, 19953-19805, 19754-19605, 19556-19407, 19357-19209, 19159-19011, 18960-18810, 18762-18613, 18563-18415, 18362-18216, 18362-18216, 17968-17819, 17894-17819, 17571-17422, 17372-17224, 17174-17025, 16975-16827, 16779-16628, 16580-16430, 16382-16231, 16181-16033, 15985-15834, 15786-15636, 15588-15437, 15387-15239, 15189-15040, 14990-14482, 14794-14445, 14595-14445, 14395-14246, 14196-14048, 13998-13849, 13799-13651, 13601-13452, 13402-13254, 13204-13055, 13005-12857, 12807-12658, 12608-12460, 12410-12311, 12211-12063, 12013-11864, 11814-11666, 11616-11467, 11417-11269, 11219-11070, 11020-10872, 10822-10673, 10623-10475. Total 1200 holes. Frac in 50 stages w/ 16299875g Slick Water + 27720g 7.5% HCl acid w/ 20045168# sand, RD Schlumberger 4/21/18. Turn well over to production for clean out, flowback and test.

14. I hereby certify that the foregoing is true and correct.
Electronic Submission #428763 verified by the BLM Well Information System For OXY USA INC, sent to the Hobbs

Name (Printed/Typed) DAVID STEWART Title SR. REGULATORY ADVISOR

Signature (Electronic Submission) Date 07/25/2018

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.

(Instructions on page 2)

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

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: July 31, 2010

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

5. Lease Serial No.
NMNM66925

1a. Type of Well Oil Well Gas Well Dry Other
 b. Type of Completion New Well Work Over Deepen Plug Back Diff. Resvr.
 Other _____

6. If Indian, Allottee or Tribe Name

7. Unit or CA Agreement Name and No.
NMNM137096X

2. Name of Operator
OXY USA INC.
Contact: SARAH CHAPMAN
E-Mail: SARAH_CHAPMAN@OXY.COM

8. Lease Name and Well No.
MESA VERDE BS UNIT 9H

3. Address P.O. BOX 4294
HOUSTON, TX 77210
3a. Phone No. (include area code)
Ph: 713-350-4997

9. API Well No.
30-025-44194

4. Location of Well (Report location clearly and in accordance with Federal requirements)*
 Sec 17 T24S R32E Mer
 At surface SWSW Lot M 280FSL 1116FWL 32.210960 N Lat, 103.701683 W Lon
 Sec 17 T24S R32E Mer
 At top prod interval reported below SWSW Lot M 362FSL 442FWL 32.211175 N Lat, 103.703880 W Lon
 Sec 8 T24S R32E Mer
 At total depth NWNW Lot D 203FNL 279FWL 32.238740 N Lat, 103.701227 W Lon

10. Field and Pool, or Exploratory
MESA VERDE BONE SPRING

11. Sec., T., R., M., or Block and Survey
or Area Sec 17 T24S R32E Mer

12. County or Parish
LEA
13. State
NM

14. Date Spudded
01/22/2018
15. Date T.D. Reached
03/16/2018
16. Date Completed
 D & A Ready to Prod.
04/21/2018

17. Elevations (DF, KB, RT, GL)*
3565 GL

18. Total Depth: MD 20504 TVD 10392
19. Plug Back T.D.: MD 20442 TVD 10392
20. Depth Bridge Plug Set: MD TVD

21. Type Electric & Other Mechanical Logs Run (Submit copy of each)
MUD LOG
22. Was well cored? No Yes (Submit analysis)
Was DST run? No Yes (Submit analysis)
Directional Survey? No Yes (Submit analysis)

23. Casing and Liner Record (Report all strings set in well)

| Hole Size | Size/Grade | Wt. (#/ft.) | Top (MD) | Bottom (MD) | Stage Cementer Depth | No. of Sk. & Type of Cement | Slurry Vol. (BBL) | Cement Top* | Amount Pulled |
|-----------|------------|-------------|----------|-------------|----------------------|-----------------------------|-------------------|-------------|---------------|
| 17.500 | 13.375 J55 | 54.5 | 0 | 952 | | 1230 | 299 | 0 | |
| 12.250 | 9.625 L80 | 47.0 | 0 | 4717 | | 1430 | 462 | 0 | |
| 8.500 | 5.500 P110 | 20.0 | 0 | 20489 | | 3048 | 938 | 50 | |
| | | | | | | | | | |
| | | | | | | | | | |

24. Tubing Record

| Size | Depth Set (MD) | Packer Depth (MD) | Size | Depth Set (MD) | Packer Depth (MD) | Size | Depth Set (MD) | Packer Depth (MD) |
|------|----------------|-------------------|------|----------------|-------------------|------|----------------|-------------------|
| | | | | | | | | |

25. Producing Intervals

26. Perforation Record

| Formation | Top | Bottom | Perforated Interval | Size | No. Holes | Perf. Status |
|--------------------|-------|--------|---------------------|-------|-----------|--------------|
| A) BONE SPRING-2ND | 10400 | 20277 | 10475 TO 20310 | 0.420 | 1200 | ACTIVE |
| B) | | | | | | |
| C) | | | | | | |
| D) | | | | | | |

27. Acid, Fracture, Treatment, Cement Squeeze, Etc.

| Depth Interval | Amount and Type of Material |
|----------------|--|
| 10400 TO 20277 | 16299875G SLICK WATER & 27720G 7.5% HCL ACID W/ 20045168# SAND |
| | |
| | |

28. Production - Interval A

| Date First Produced | Test Date | Hours Tested | Test Production | Oil BBL | Gas MCF | Water BBL | Oil Gravity Corr. API | Gas Gravity | Production Method |
|---------------------|-------------------|--------------|-----------------|---------|---------|-----------|-----------------------|-------------|-------------------|
| 04/26/2018 | 05/12/2018 | 24 | → | 3021.0 | 4152.0 | 9919.0 | | | FLOWS FROM WELL |
| Choke Size | Tbg. Press. Flwg. | Csg. Press. | 24 Hr. Rate | Oil BBL | Gas MCF | Water BBL | Gas:Oil Ratio | Well Status | |
| 64/184 | SI | 1070.0 | → | 3021 | 4152 | 9919 | | POW | |

28a. Production - Interval B

| Date First Produced | Test Date | Hours Tested | Test Production | Oil BBL | Gas MCF | Water BBL | Oil Gravity Corr. API | Gas Gravity | Production Method |
|---------------------|-------------------|--------------|-----------------|---------|---------|-----------|-----------------------|-------------|-------------------|
| | | | → | | | | | | |
| Choke Size | Tbg. Press. Flwg. | Csg. Press. | 24 Hr. Rate | Oil BBL | Gas MCF | Water BBL | Gas:Oil Ratio | Well Status | |
| | SI | | → | | | | | | |

Documents pending BLM approvals will subsequently be reviewed and scanned

(See Instructions and spaces for additional data on reverse side)

ELECTRONIC SUBMISSION #428771 VERIFIED BY THE BLM WELL INFORMATION SYSTEM

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

28b. Production - Interval C

| Date First Produced | Test Date | Hours Tested | Test Production | Oil BBL | Gas MCF | Water BBL | Oil Gravity Corr. API | Gas Gravity | Production Method |
|---------------------|----------------------|--------------|-----------------|---------|---------|-----------|-----------------------|-------------|-------------------|
| | | | → | | | | | | |
| Choke Size | Tbg. Press. Flwg. SI | Csg. Press. | 24 Hr. Rate | Oil BBL | Gas MCF | Water BBL | Gas:Oil Ratio | Well Status | |
| | | | → | | | | | | |

28c. Production - Interval D

| Date First Produced | Test Date | Hours Tested | Test Production | Oil BBL | Gas MCF | Water BBL | Oil Gravity Corr. API | Gas Gravity | Production Method |
|---------------------|----------------------|--------------|-----------------|---------|---------|-----------|-----------------------|-------------|-------------------|
| | | | → | | | | | | |
| Choke Size | Tbg. Press. Flwg. SI | Csg. Press. | 24 Hr. Rate | Oil BBL | Gas MCF | Water BBL | Gas:Oil Ratio | Well Status | |
| | | | → | | | | | | |

29. Disposition of Gas(Sold, used for fuel, vented, etc.)
SOLD

30. Summary of Porous Zones (Include Aquifers):

Show all important zones of porosity and contents thereof: Cored intervals and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures and recoveries.

31. Formation (Log) Markers

| Formation | Top | Bottom | Descriptions, Contents, etc. | Name | Top |
|-----------------|-------|--------|------------------------------|---------------|-------------|
| | | | | | Meas. Depth |
| BELL CANYON | 4672 | 5509 | OIL, GAS, WATER | RUSTLER | 903 |
| CHERRY CANYON | 5510 | 6849 | OIL, GAS, WATER | SALADO | 1000 |
| BRUSHY CANYON | 6850 | 8511 | OIL, GAS, WATER | CASTILE | 3165 |
| BONE SPRING | 8512 | 9697 | OIL, GAS, WATER | DELAWARE | 4643 |
| BONE SPRING 1ST | 9698 | 1335 | OIL, GAS, WATER | BELL CANYON | 4672 |
| BONE SPRING 2ND | 10336 | 10510 | OIL, GAS, WATER | CHERRY CANYON | 5510 |
| | | | | BRUSHY CANYON | 6850 |
| | | | | BONE SPRING | 8512 |

32. Additional remarks (include plugging procedure):

LOG HEADER, DIRECTIONAL SURVEY, AS-DRILLED C-102 PLAT AND WBD ARE ATTACHED.

33. Circle enclosed attachments:

- 1. Electrical/Mechanical Logs (1 full set req'd.)
- 2. Geologic Report
- 3. DST Report
- 4. Directional Survey
- 5. Sundry Notice for plugging and cement verification
- 6. Core Analysis
- 7 Other:

34. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records (see attached instructions):

**Electronic Submission #428771 Verified by the BLM Well Information System.
 For OXY USA INC., sent to the Hobbs**

Name (please print) DAVID STEWART Title SR. REGULATORY ADVISOR

Signature (Electronic Submission) Date 07/25/2018

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.