

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.

Carlsbad Field Office
OC D Hobbs

Lease Serial No. 166925
If Indian, Allottee or Tribe Name
If Unit or CA/Agreement, Name and/or No. NMMN137096X

SUBMIT IN TRIPLICATE - Other instructions on page 2

HOBBS OOD

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		8. Well Name and No. MESA VERDE BS UNIT 14	
2. Name of Operator OXY USA INCORPORATED		Contact: SARAH CHAPMAN E-Mail: SARAH_CHAPMAN@OXY.COM	9. API Well No. 30-025-44191-00-X1
3a. Address P O BOX 4294 HOUSTON, TX 77210-4294	3b. Phone No. (include area code) Ph: 713-350-4997	10. Field and Pool or Exploratory Area MESA VERDE	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 18 T24S R32E 310FSL 1078FWL 32.210979 N Lat, 103.719498 W Lon		11. County or Parish, State LEA COUNTY, NM	

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RECEIVED

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 Drilling 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 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.

7/16/18 RU BOP, test @ 250# low 5000# high, good test. Test 10-3/4" csg to 1500# for 30min, good test. Drill new formation to 959', perform FIT test to EMW=19.5ppg, 430psi, good test. Drill 12-1/4" hole to 9958'. RIH & set 7-5/8" 26.4# L-80 BTC csg @ 9943', DVT @ 4695', ACP @ 4713', pump 40bbl spacer then cmt w/ 550sxs (225bbl) Class H w/ additives 10.7ppg, 2.25 yield followed by 1160sxs (470bbl) class H w/ additives 13.2ppg, 1.65 yield. Full returns throughout job, inflate ACP to 2500#, open and circulate through DVT but no cmt to surface. Contacted Steven (Lea County BLM) that we did not get cmt to surface, got okay to proceed with second stage. Pump 2nd stage w/ 40bbl spacer, then cmt w/ 1170sxs (390bbl) class H w/ additives 12.9ppg, 1.87 yield, maintained full returns throughout job, 573sxs (191bbl) cmt to surface. WOC.

14. I hereby certify that the foregoing is true and correct.
Electronic Submission #428552 verified by the BLM Well Information System For OXY USA INCORPORATED, sent to the Hobbs Committed to AFMSS for processing by PRISCILLA PEREZ on 07/25/2018 (18PP1541SE)

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

Signature (Electronic Submission) Date **07/24/2018**

THIS SPACE FOR FEDERAL OR STATE AGENCY USE ONLY

ACCEPTED FOR RECORD

Approved By _____ Title _____ Date **JUL 25 2018** /s/ **Jonathon Shepa**

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 any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.