

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

Form C-104
Revised August 1, 2011

HOBBS OGD
NOV 19 2018
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Oil Conservation Division
1380 South St. Francis Dr.
Santa Fe, NM 87505

Submit one copy to appropriate District Office

AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address OXY USA Inc. P.O. BOX 50250 Midland, TX 79710		² OGRID Number 16696
⁴ API Number 30-025-44101		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: 1H

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
P	17	24S	32E		271	SOUTH	245	EAST	LEA

¹¹ Bottom Hole Location FTP- 353' FSL 925' FEL LTP- 450' FNL 990' FEL

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
A	8	24S	32E		335	NORTH	992	EAST	LEA

¹² Lse Code F	¹³ Producing Method Code: F	¹⁴ Gas Connection Date: 9/7/18	¹⁵ C-129 Permit Number	¹⁶ C-129 Effective Date	¹⁷ C-129 Expiration Date
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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

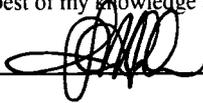
IV. Well Completion Data

²¹ Spud Date	²² Ready Date	²³ TD	²⁴ PBDT	²⁵ Perforations	²⁶ DHC, MC
12/27/17	8/25/18	19366'M 9291'V	19301'M 9290'V	9451-19251'	
²⁷ Hole Size	²⁸ Casing & Tubing Size	²⁹ Depth Set		³⁰ Sacks Cement	
17-1/2"	13-3/8"	918'		1264	
12-1/4"	9-5/8"	11062'		5905	
8-1/2"	5-1/2"	19350'		2621	

V. Well Test Data

³¹ Date New Oil	³² Gas Delivery Date	³³ Test Date	³⁴ Test Length	³⁵ Tbg. Pressure	³⁶ Csg. Pressure
8/28/18	9/7/18	9/4/18	24 HRS.		1077
³⁷ Choke Size	³⁸ Oil	³⁹ Water	⁴⁰ Gas	⁴¹ Test Method	
82/128	2246	5082	3758	F	

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:



Printed name:
Jana Mendiola
Title:
Regulatory Specialist

E-mail Address:
janalyn_mendiola@oxy.com

Date: 11/13/18 Phone: 432-685-5936

OIL CONSERVATION DIVISION	
Approved by:	<i>Karen Sharp</i>
Title:	<i>Staff Mgr</i>
Approval Date:	<i>11-26-18</i>
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.

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5. Lease Serial No.
NMNM66925

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.
NMNM137099X

Well Name and No.
MESA VERDE BONE SPRING UNIT 1H

9. API Well No.
30-025-44101

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

11. County or Parish, State
LEA COUNTY, NM

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
OXY USA INC. Contact: JANA MENDIOLA
E-Mail: janalyn_mendiola@oxy.com

3a. Address
P.O. BOX 50250
MIDLAND, TX 79710

3b. Phone No. (include area code)
Ph: 432-685-5936

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 17 T24S R32E Mer NMP SESE 271FSL 245FEL
32.210999 N Lat, 103.688979 W Lon

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 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.

RUPU 6/30/18, RIH & clean out to PBTD @ 19301'. Pressure test csg to 9800# for 30 min, good test. RIH & perf @ 19251-19099, 19051-18898, 18845-18697, 18647-18496, 18446-18295, 18245-18094, 18046-17893, 17847-17692, 17639-17494, 17441-17290, 17240-17090, 17039-16892, 16838-16687, 16637-16486, 16436-16285, 16235-16084, 16034-15883, 15726-15577, 15632-15481, 15431-15280, 15230-15079, 15029-14878, 14828-14677, 14627-14476, 14426-14275, 14024-13873, 14024-13873, 13823-13673, 13622-13471, 13424-13270, 13223-13069, 13019-12868, 12815-12667, 12617-12466, 12416-12265, 12215-12064, 12014-11863, 11813-11664, 11611-11463, 11410-11264, 11209-11057, 11008-10858, 10801-10657, 10606-10456, 10405-10255, 10204-10054, 10003-9853, 9802-9652, 9601-9451'
Total 1176 holes. Frac in 49 stages w/ 652218g Slick Water + 106134g linear gel + 28350g 7.5% HCl acid w/ 18701852# sand, RD Schlumberger 8/12/18. RIH & clean out, flow to clean up and test well for potential.

14. I hereby certify that the foregoing is true and correct.
Electronic Submission #443817 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 11/13/2018

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

(Instructions on page 2)

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

Documents pending BLM approvals will subsequently be reviewed and scanned

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

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5. Lease Serial No. **NMNM66925**

6. If Indian, Allottee or Tribe Name

7. Unit or CA Agreement Name and No. **NMNM137099X**

8. Lease Name and Well No. **MESA VERDE BONE SPRING UNIT 1H**

9. API Well No. **30-025-44101**

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 NMP**

12. County or Parish **LEA** 13. State **NM**

14. Date Spudded **12/27/2017** 15. Date T.D. Reached **03/14/2018** 16. Date Completed D & A Ready to Prod. **08/25/2018** 17. Elevations (DF, KB, RT, GL)* **3564 GL**

18. Total Depth: MD **19366** TVD **9291** 19. Plug Back T.D.: MD **19301** TVD **9290** 20. Depth Bridge Plug Set: MD **19301** TVD **9290**

21. Type Electric & Other Mechanical Logs Run (Submit copy of each) **LITHO,BPL,CMR,SGR,HRLA,TCOM,GR,MAST,CNL,SONICSCAN** 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 Pilled
17.500	13.375 J55	54.5	0	918		1264	306	0	
12.250	9.625 L80	53.5	0	11062	4749	5905	1956	1985	
8.500	5.500 P110	23.0	0	19350		2621	743	4000	

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	9451	19251	9451 TO 19251	0.370	1176	ACTIVE
B)						
C)						
D)						

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

Depth Interval	Amount and Type of Material
9451 TO 19251	652218G SLICKWATER + 28350G 7.5% HCL ACID + 106134G LINEAR GEL W/ 18701852# 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
08/28/2018	09/04/2018	24	▶	2246.0	3758.0	5082.0			FLOWS FROM WELL
Choke Size	Tbg. Press Flwg	Csg. Press	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
82/128	SI	1077.0	▶	2246	3758	5082	1673	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		▶						

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

ELECTRONIC SUBMISSION #443818 VERIFIED BY THE BLM WELL INFORMATION
**** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED**

Documents pending BLM approvals will
 subsequently be reviewed and scanned

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	4676	5581	OIL, GAS, WATER	RUSTLER	865
CHERRY CANYON	5582	6865	OIL, GAS, WATER	SALADO	1192
BRUSHY CANYON	6866	8518	OIL, GAS, WATER	CASTILE	3213
BONE SPRING	8519	9291	OIL, GAS, WATER	DELAWARE	4652
				BELL CANYON	4676
				CHERRY CANYON	5582
				BRUSHY CANYON	6866
				BONE SPRING	8519

32. Additional remarks (include plugging procedure):
Logs were mailed 11/13/18.

Log Header, Directional Survey, As-Drilled Amended C-102 plat & 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 #443818 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 11/13/2018

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