

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

Oil Conservation Division
1220 South St. Francis Dr.

Submit one copy to appropriate District Office

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

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

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 30-025-44195		³ Reason for Filing Code/ Effective Date - NW
⁵ Pool Name Mesa Verde Wolfcamp	⁶ Pool Code 98252	
⁷ Property Code: 320829	⁸ Property Name: Mesa Verde WC Unit	⁹ Well Number: 1H

NOV 13 2018
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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		241	SOUTH	245	EAST	LEA

¹¹ Bottom Hole Location FTP- 373' FSL 426' FEL LTP- 356' FNL 446' 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		192	NORTH	454	EAST	LEA

¹² Lse Code F	¹³ Producing Method Code: F	¹⁴ Gas Connection Date: 9/8/18	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 12/30/17	²² Ready Date 8/25/18	²³ TD 22281'M 12054'V	²⁴ PBSD 22216'M 12054'V	²⁵ Perforations 12240-22116'	²⁶ DHC, MC
²⁷ Hole Size	²⁸ Casing & Tubing Size	²⁹ Depth Set		³⁰ Sacks Cement	
17-1/2"	13-3/8"	922'		1190	
12-1/4"	9-5/8"	10933'		3620	
8-1/2"	5-1/2"	10764-22271'		2193	

V. Well Test Data

³¹ Date New Oil 8/25/18	³² Gas Delivery Date 9/8/18	³³ Test Date 9/5/18	³⁴ Test Length 24 HRS.	³⁵ Tbg. Pressure	³⁶ Csg. Pressure 1580
³⁷ Choke Size 48/128	³⁸ Oil 4775	³⁹ Water 5736	⁴⁰ Gas 9163	⁴¹ Test Method 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: 11/12/18 Phone: 432-685-5936

OIL CONSERVATION DIVISION

Approved by:

Title:

Approval Date:

11-26-18

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

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

8. Well Name and No.
MESA VERDE WOLFCAMP UNIT 1H

9. API Well No.
30-025-44195

10. Field and Pool or Exploratory Area
MESA VERDE WOLFCAMP

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 241FSL 245FEL
32.210916 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 7/12/18, RIH & clean out to PBTD @ 22216'. Pressure test csg to 9800# for 30 min, good test. RIH & perf @ 22116-21967, 21917-21768, 21718-21570, 21520-21371, 21321-21177, 21123-20976, 20924-20776, 20726-20579, 20527-20379, 20329-20182, 20128-19982, 19932-19783, 19733-19575, 19535-19386, 19338-19188, 19138-18989, 18939-18791, 18741-18592, 18542-18394, 18344-18195, 18145-17997, 17947-17798, 17748-17600, 17550-17401, 17351-17203, 17153-17004, 16954-16806, 16756-16607, 16557-16409, 16359-16210, 16160-16012, 15962-15813, 15763-15615, 15565-15416, 15366-15218, 15168-15019, 14969-14825, 14771-14626, 14572-14424, 14374-14227, 14175-14027, 13974-13828, 13780-13630, 13580-13431, 13381-13233, 13183-13034, 12984-12836, 12786-12637, 12587-12439, 12389-12240' Total 1200 holes. Frac in 50 stages w/ 345030g linear gel + 50190g 7.5% HCl acid w/ 19228492# 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 #443730 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 11/12/2018

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____ Title _____

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

(Instructions on page 2)

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

Documents pending BLM approvals will subsequently be reviewed and scanned

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

HOBBS OCU
NOV 19 2018
RECEIVED

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

WELL COMPLETION OR RECOMPLETION REPORT

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.
NMNM137099X

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

8. Lease Name and Well No.
MESA VERDE WOLFCAMP UNIT 1H

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

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

9. API Well No.
30-025-44195

4. Location of Well (Report location clearly and in accordance with Federal requirements)*
Sec 17 T24S R32E Mer NMP
At surface SESE 241FSL 245FEL 32.210916 N Lat, 103.688979 W Lon
Sec 17 T24S R32E Mer NMP
At top prod interval reported below SESE 373FSL 426FEL 32.211200 N Lat, 103.689560 W Lon
Sec 8 T24S R32E Mer NMP
At total depth NENE 192FNL 454FEL 32.238770 N Lat, 103.689460 W Lon

10. Field and Pool, or Exploratory
MESA VERDE WOLFCAMP

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
12/30/2017

15. Date T.D. Reached
05/03/2018

16. Date Completed
 D & A Ready to Prod.
08/25/2018

17. Elevations (DF, KB, RT, GL)*
3559 GL

18. Total Depth: MD 22281
TVD 12054

19. Plug Back T.D.: MD 22216
TVD 12054

20. Depth Bridge Plug Set: MD
TVD

21. Type Electric & Other Mechanical Logs Run (Submit copy of each)
GR,CNL,TRIPLECOMBO,SGR,RESISTIVITY,CMR,MUDLOG

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	922		1190	286	0	
12.250	9.625 L80	47.0	0	10933	4728	3620	1316	0	
8.500	5.500 P110	20.0	10764	22271		2193	539	10764	

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) WOLFCAMP	12240	22116	12240 TO 22116	0.370	1200	ACTIVE
B)						
C)						
D)						

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

Depth Interval	Amount and Type of Material
12240 TO 22116	345030G LINEAR GEL + 50190G 7.5% HCL ACID W/ 19228492# 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
08/25/2018	09/05/2018	24	→	4775.0	9163.0	5736.0			FLOW FROM WELL
Choke Size	Tbg. Press. Flwg.	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
48/128	SI	1580.0	→	4775	9163	5736	1919	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 #443728 VERIFIED BY THE BLM WELL INFORMATION SYSTEM
** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** O

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	6876	5570	OIL, GAS, WATER	RUSTLER	867
CHERRY CANYON	5571	6875	OIL, GAS, WATER	SALADO	1194
BRUSHY CANYON	6876	8572	OIL, GAS, WATER	CASTILE	3206
BONE SPRING	8573	9644	OIL, GAS, WATER	DELAWARE	4648
1ST BONE SPRINGS	9645	10353	OIL, GAS, WATER	BELL CANYON	6876
2ND BONE SPRINGS	10354	12024	OIL, GAS, WATER	CHERRY CANYON	5571
WOLFCAMP	12025	12054	OIL, GAS, WATER	BRUSHY CANYON	6876
				BONE SPRING	8573

32. Additional remarks (include plugging procedure):
52. FORMATION (LOG) MARKERS CONTD.

1ST BONE SPRINGS 9645'M
2ND BONE SPRINGS 10354'M
WOLFCAMP 12025'M

Logs were mailed 11/13/18.

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 #443728 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 11/12/2018

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.

**** ORIGINAL ** ORIGINAL ****

Additional data for transaction #443728 that would not fit on the form

32. Additional remarks, continued

Log Header, Directional Survey, As-Drilled Amended C-102 plat & WBD are attached.