

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
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 2

9. API Well No.
30-025-44196-00-X1

10. Field and Pool or Exploratory Area
BONE SPRINGS

11. County or Parish, State
LEA COUNTY, NM

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
OXY USA INCORPORATED
Contact: LESLIE REEVES
E-Mail: LESLIE_REEVES@OXY.COM

3a. Address
P O BOX 4294
HOUSTON, TX 77210-4294

3b. Phone No. (include area code)
Ph: 713-497-2492

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 17 T24S R32E SWSE 240FSL 1614FEL
32.210892 N Lat, 103.693405 W Lon

Carlsbad Field Office
OCD Hobbs
HOBBS OCD
NOV 28 2018
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 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 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 7/6/18, RIH & clean out to PBD @ 22026'. Pressure test csg to 9800# for 30 min, good test. RIH & perf from 21715-21565, 21515-21365, 21317-21165, 21117-20965, 20917-20765, 20717-20565, 20513-20365, 20317-20165, 20117-19965, 19917-19765, 19717-19565, 19515-19365, 19315-19165, 21917-21765, 19117-18965, 18917-18765, 18717-18565, 18515-18365, 18315-18165, 18117-17965, 17917-17765, 17718-17565, 17517-17365, 17315-17165, 17117-16965, 16917-16765, 16715-16565, 16517-16365, 16315-16165, 16115-15965, 15917-15765, 15715-15565, 15517-15365, 15315-15165, 15117-14965, 14917-14765, 14715-14563, 14515-14365, 14317-14165, 14117-13965, 13915-13766, 13710-13565, 13515-13365, 13317-13165, 13117-12965, 12915-12765, 12715-12565, 12515-12361, 12317-12165, total 1176 holes. Frac in 49 stages w/ 38607534g Slick Water + 39732g 7.5% HCl acid w/ 19619507# sand, RD Schlumberger 7/24/18. Turn well over to production for clean out, flowback and test.

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

**Electronic Submission #442728 verified by the BLM Well Information System
For OXY USA INCORPORATED, sent to the Hobbs
Committed to AFMSS for processing by PRISCILLA PEREZ on 11/06/2018 (19PP0310SE)**

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

Signature (Electronic Submission) Date 11/06/2018

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 NOV 07 2018 /s/ Jonathon Shepard

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.