

Form 3160-4  
(August 2007)

HOBBS OCD

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

RECEIVED

MAY 22 2019  
Operator CopyFORM APPROVED  
OMB No. 1004-0137  
Expires: July 31, 2010

## WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. Type of Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Dry <input type="checkbox"/> Other		5. Lease Serial No. NMNM66925	
b. Type of Completion <input checked="" type="checkbox"/> New Well <input type="checkbox"/> Work Over <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Diff. Resvr. Other _____		6. If Indian, Allottee or Tribe Name	
2. Name of Operator OXY USA INCORPORATED		7. Unit or CA Agreement Name and No. NMNM137096X	
Contact: DAVID STEWART E-Mail: DAVID_STEWART@OXY.COM		8. Lease Name and Well No. MESA VERDE BS UNIT 10H	
3. Address P O BOX 4294 HOUSTON, TX 77210-4294		9. API Well No. 30-025-44188-00-S1	
3a. Phone No. (include area code) Ph: 432-685-5717		10. Field and Pool, or Exploratory MESA VERDE	
4. Location of Well (Report location clearly and in accordance with Federal requirements)* At surface SESE 420FSL 1040FEL 32.211315 N Lat, 103.708656 W Lon Sec 18 T24S R32E Mer NMP At top prod interval reported below NENE 129FSL 490FEL 32.238279 N Lat, 103.706725 W Lon Sec 7 T24S R32E Mer NMP At total depth NENE 177FNL 502FEL		11. Sec., T., R., M., or Block and Survey or Area Sec 18 T24S R32E Mer NMP	
14. Date Spudded 02/27/2018		15. Date T.D. Reached 06/22/2018	
16. Date Completed <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod. 07/14/2018		17. Elevations (DF, KB, RT, GL)* 3570 GL	
18. Total Depth: MD TVD 20765 10684		19. Plug Back T.D.: MD TVD 20709 10684	
20. Depth Bridge Plug Set: MD TVD		21. Type Electric & Other Mechanical Logs Run (Submit copy of each) GAMMARAYANDMUOL	
22. Was well cored? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Was DST run? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Directional Survey? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis)			

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

Hole Size	Size/Grade	WL (#/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	943		1225	294	0	
12.250	9.625 L80	43.5	0	4716		1563	464	0	
8.500	5.500 P110	20.0	0	20753		2414	590	4400	

## 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

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) BONE SPRING	8576	20574	10302 TO 20574	0.000	1325	ACTIVE
B)						
C)						
D)						

## 26. Perforation Record

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

Depth Interval	Amount and Type of Material
10302 TO 20574	16474866G SLICK WATER & 250000G OF 7.5% HCL W/ 20846369# 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
08/14/2018	08/19/2018	24	→	2702.0	4775.0	9369.0			FLOW FROM WELL
Choke Size	Tbg. Press. Flwg.	Crg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
80/128	SI		→	2702	4775	9369	1767	PDW	

## 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.	Crg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
	SI		→						

BUREAU OF LAND MANAGEMENT  
CARLSBAD FIELD OFFICE

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

ELECTRONIC SUBMISSION #442163 VERIFIED BY THE BLM WELL INFORMATION SYSTEM

\*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\*

Reclamation Due: 1/14/2019

KZ

**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	4664	5561	OIL, GAS, WATER	RUSTLER	825
CHERRY CANYON	5562	6897	OIL, GAS, WATER	SALADO	1145
BRUSHY CANYON	6898	8575	OIL, GAS, WATER	CASTILE	3323
BONE SPRING	8576	9563	OIL, GAS, WATER	DELAWARE	4639
BONE SPRING 1ST	9564	9905	OIL, GAS, WATER	BELL CANYON	4664
BONE SPRING 2ND	9906	10125	OIL, GAS, WATER	CHERRY CANYON	5562
				BRUSHY CANYON	6898
				BONE SPRING	8576

**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 #442163 Verified by the BLM Well Information System.

For OXY USA INCORPORATED, sent to the Hobbs

Committed to AFMSS for processing by DINAH NEGRETE on 04/06/2019 (19DCN0064SE)

Name (please print) SARAH CHAPMAN

Title REGULATORY SPECIALIST

Signature (Electronic Submission)

Date 11/01/2018

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

**\*\* REVISED \*\* REVISED \*\* REVISED \*\* REVISED \*\* REVISED \*\* REVISED \*\* REVISED \*\***