

HOBBS OCD

Form 3160-4
(August 2007)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

AUG 28 2019
Operator Copy

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

WELL COMPLETION OR RECOMPLETION REPORT RECEIVED

5. Lease Serial No.
NMNM55953

6. If Indian, Allottee or Tribe Name

7. Unit or CA Agreement Name and No.
NMNM137096X

8. Lease Name and Well No.
MESA VERDE BS UNIT 22H

9. API Well No.
30-025-44559-00-S1

10. Field and Pool, or Exploratory
MESA VERDE-BONE SPRING

11. Sec., T., R., M., or Block and Survey
or Area Sec 16 T24S R32E Mer NMP

12. County or Parish
LEA

13. State
NM

17. Elevations (DF, KB, RT, GL)*
3568 GL

1a. Type of Well Oil Well Gas Well Dry Other

b. Type of Completion New Well Work Over Deepen Plug Back Diff. Resvr.
Other _____

2. Name of Operator
OXY USA INCORPORATED

Contact: LESLIE REEVES
E-Mail: LESLIE_REEVES@OXY.COM

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

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

4. Location of Well (Report location clearly and in accordance with Federal requirements)*
Sec 16 T24S R32E Mer NMP
At surface SWSW 250FSL 1285FWL 32.210952 N Lat, 103.684032 W Lon
Sec 16 T24S R32E Mer NMP
At top prod interval reported below SESW 326FSL 2153FWL 32.211150 N Lat, 103.681230 W Lon
Sec 9 T24S R32E Mer NMP
At total depth NENW 14FNL 2153FWL 32.239240 N Lat, 103.681010 W Lon

14. Date Spudded
06/06/2018

15. Date T.D. Reached
08/25/2018

16. Date Completed
 D & A Ready to Prod.
11/20/2018

18. Total Depth: MD 20815 TVD 10522

19. Plug Back T.D.: MD 10763 TVD 10522

20. Depth Bridge Plug Set: MD TVD

21. Type Electric & Other Mechanical Logs Run (Submit copy of each)
GR

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	964		1254	302	0	
12.250	9.625 L80	43.5	0	4721		1565	507	0	
8.500	5.500 P110	20.0	0	20806		2980	867	1547	

24. Tubing Record

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)
2.375	10280	10280						

25. Producing Intervals

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) BONE SPRING 2ND	10565	20668	10565 TO 20668	0.000	1200	ACTIVE
B)						
C)						
D)						

26. Perforation Record

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) BONE SPRING 2ND	10565	20668	10565 TO 20668	0.000	1200	ACTIVE

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

Depth Interval	Amount and Type of Material
10565 TO 20668	383220 BBLs SLICK WATER & 362 BBLs 7.5% HCL ACID W/ 20031633# 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
12/01/2018	12/28/2018	24	→	2008.0	3325.0	5557.0			GAS-LIFT
Choke Size	Tbg. Press. Flwg.	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
100/128	SI	532.0	→	2008	3325	5557	1656	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		→						

ACCEPTED FOR RECORD

AUG 4 2019

Leslie Reeves

BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE

(See Instructions and spaces for additional data on reverse side)
ELECTRONIC SUBMISSION #455372 VERIFIED BY THE BLM WELL INFORMATION SYSTEM
** BLM REVISED **

Reclamation Due: 5/20/2019

K2

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	4737	5600	OIL, GAS, WATER	RUSTLER	901
CHERRY CANYON	5601	6888	OIL, GAS, WATER	SALADO	1230
BRUSHY CANYON	6889	8622	OIL, GAS, WATER	CASTILE	3279
BONE SPRING	8623	9744	OIL, GAS, WATER	DELAWARE	4709
BONE SPRING 1ST	9745	10302	OIL, GAS, WATER	BELL CANYON	4737
BONE SPRING 2ND	10303	10545	OIL, GAS, WATER	CHERRY CANYON	5601
				BRUSHY CANYON	6889
				BONE SPRING	8623

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 #455372 Verified by the BLM Well Information System.
For OXY USA INCORPORATED, sent to the Hobbs
Committed to AFMSS for processing by DEBORAH HAM on 07/16/2019 (19DMH0132SE)

Name (please print) LESLIE REEVES Title REGULATORY ADVISOR

Signature _____ (Electronic Submission) Date 02/20/2019

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 ****

District I
1623 N French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720
District II
811 S. First St., Artesia, NM 88210
Phone: (575) 748-1243 Fax: (575) 748-9720
District III
1000 Rio Bravo Road, Aztec, NM 87410
Phone: (505) 334-6178 Fax: (505) 334-6170
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505
Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico
Energy, Minerals & Natural Resources Department
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-102
Revised August 1, 2011
Submit one copy to appropriate
District Office

AMENDED REPORT
AS-DRILLED

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30-025-44559	Pool Code 96229	Pool Name Mesa Verde Bone Springs
Property Code 320828	Property Name MESA VERDE BONE SPRING UNIT	Well Number 22H
OGRID No 16696	Operator Name OXY USA INC.	Elevation 3568.2'

Surface Location

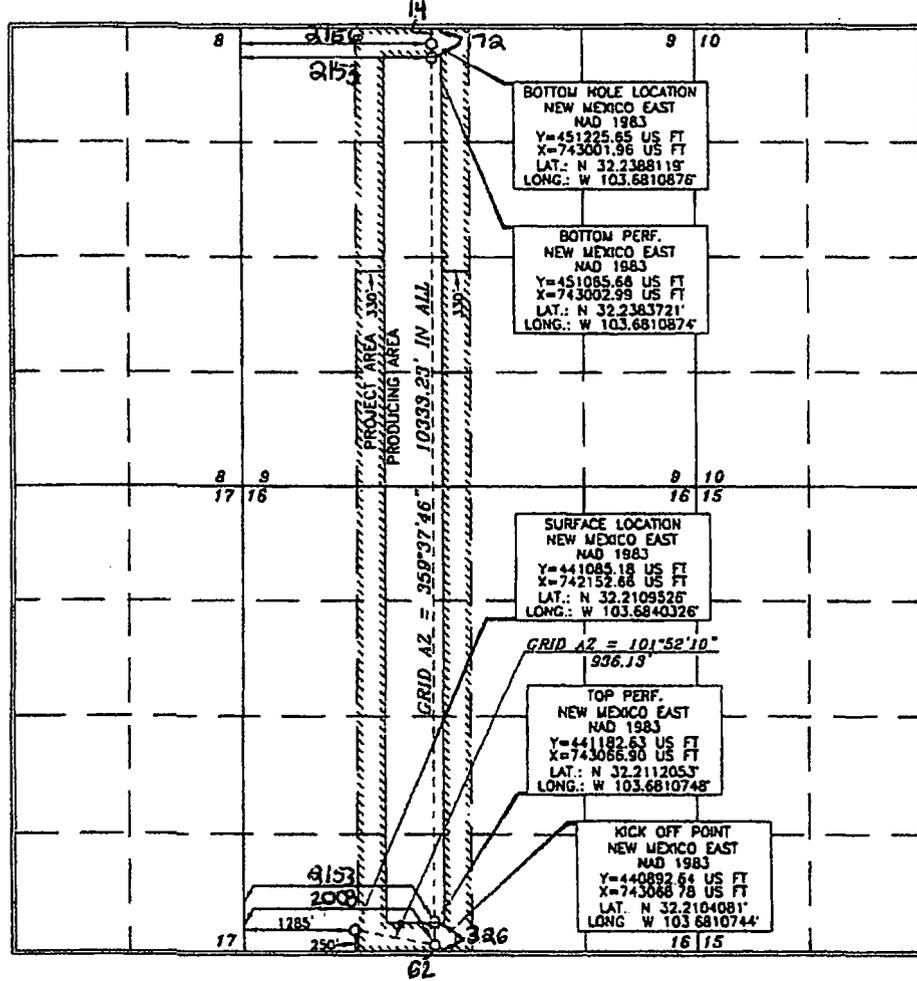
UL or lot no	Section	Township	Range	Lot (dn)	Feet from the	North/South line	Feet from the	East/West line	County
M	16	24 SOUTH	32 EAST, N.M.P.M.		250'	SOUTH	1285'	WEST	LEA

Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot (dn)	Feet from the	North/South line	Feet from the	East/West line	County
C	9	24 SOUTH	32 EAST, N.M.P.M.		14	NORTH	2153	WEST	LEA

Dedicated Acres 320	Joint or Infill	Consolidation Code	Order No. TP/FTP: 326' FSL 2153' FWL BP/LTP: 172' FNL 2153' FWL
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No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.



OPERATOR CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or undivided mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the district.

Leslie Reeves 11/16/18
Date: _____
LESLIE REEVES
Printed Name: _____
E-mail Address: **LESLIE-REEVES@OXY.COM**

SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision and that the same is true and correct to the best of my belief.

FERRY J. ASH
15079
JULY 3, 2017
Date of Survey

Signature and Seal of Professional Surveyor
Ferry J. Ash 8/16/2017
Certificate Number: 15079

WO# 170703WL (0A)

Intent As Drilled

API #
30-025-44559

Operator Name: OXY USA INC.	Property Name: MESA VERDE BONE SPRING UNIT	Well Number 22H
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Kick Off Point (KOP)

UL N	Section 16	Township 24S	Range 32E	Lot	Feet 62	From N/S FSL	Feet 2008	From E/W FWL	County LEA
Latitude 32.21042					Longitude -103.68170				NAD NAD83

First Take Point (FTP)

UL N	Section 16	Township 24S	Range 32E	Lot	Feet 326	From N/S FSL	Feet 2153	From E/W FWL	County LEA
Latitude 32.21115					Longitude -103.68123				NAD NAD83

Last Take Point (LTP)

UL C	Section 9	Township 24S	Range 32E	Lot	Feet 172	From N/S FNL	Feet 2153	From E/W FWL	County LEA
Latitude 32.23881					Longitude -103.68103				NAD NAD83

Is this well the defining well for the Horizontal Spacing Unit?

Is this well an infill well?

If infill is yes please provide API if available, Operator Name and well number for Defining well for Horizontal Spacing Unit.

API #

Operator Name:	Property Name:	Well Number
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