

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

**SUBMIT IN TRIPLICATE - Other instructions on page 2**

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

8. Well Name and No.  
MESA VERDE WC UNIT 7H

9. API Well No.  
30-025-45920-00-X1

10. Field and Pool or Exploratory Area  
MESA VERDE

1. Type of Well  
 Oil Well  Gas Well  Other

2. Name of Operator  
OXY USA INCORPORATED

Contact: SARAH E CHAPMAN  
E-Mail: SARAH\_CHAPMAN@OXY.COM

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

3b. Phone No. (include area code)  
Ph: 713-350-4997

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
Sec 17 T24S R32E SESW 280FSL 1421FWL  
32.210968 N Lat, 103.700699 W Lon

11. County or Parish, State  
LEA COUNTY, NM

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 Drilling 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.

6/27/19 MIRU, test BOP to 5000# 250# low, good test. Test 10-3/4" csg to 1500# for 30 minutes, good test. RIH & drill new formation to 955', perform FIT test to EMW=8.6ppg 457#, good test. Drill 9-7/8" hole to 11481'. RIH & set 7-5/8" 26.4# HCL-80 BTC csg @ 11461', pump 40bbl tuned spacer then cmt w/ 565sxs (275bbl) class C w/ additives 11.0ppg 2.73 yield followed by 660sxs (169bbl) class C w/ additives 13.2ppg 1.44 yield. WOC, perform 2nd cmt job w/ 275sxs (70bbl) class H w/ additives 12.8ppg 1.96 yield, no cmt to surface. Shot echometer, observed TOC @ 56'. Pump 30sxs class H w/ additives 12.8ppg 1.76 yield, full returns throughout job, circ cmt to surface.

7/5/19 Test 7-5/8" csg to 2100# for 30 minutes, good test. RIH & drill new formation to 11491', perform FIT test to EMW=10.9ppg 2400#, good test. Drill 6-3/4" hole to 12211'V/22433'M. RIH & set 5-1/2" 20# DQX/TORQDQW csg @ 22433', pump 180bbl spacer then cmt w/ 805sxs (206bbl) class H w/ additives 13.2ppg 1.44 yield. Full returns throughout job, TOC @ 10960'. 7/17/19 ND BOP, cut csg,

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

Electronic Submission #475111 verified by the BLM Well Information System  
For OXY USA INCORPORATED, sent to the Hobbs  
Committed to AFMSS for processing by PRISCILLA PEREZ on 07/29/2019 (19PP2612SE)

Name (Printed/Typed) SARAH E CHAPMAN

Title REGULATORY SPECIALIST

Signature (Electronic Submission)

Date 07/25/2019

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By **ACCEPTED**

JONATHON SHEPARD  
Title PETROELUM ENGINEER

Date 07/31/2019

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 Hobbs

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.

(Instructions on page 2)

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

**Additional data for EC transaction #475111 that would not fit on the form**

**32. Additional remarks, continued**

Install nightcap and rig release.

## Revisions to Operator-Submitted EC Data for Sundry Notice #475111

	<b>Operator Submitted</b>	<b>BLM Revised (AFMSS)</b>
Sundry Type:	DRG SR	DRG SR
Lease:	NMNM66925	NMNM66925
Agreement:		NMNM137099X (NMNM137099X)
Operator:	OXY USA INC. P.O. BOX 4294 HOUSTON, TX 77210 Ph: 713-350-4997	OXY USA INCORPORATED P O BOX 4294 HOUSTON, TX 77210-4294 Ph: 713.366.5303
Admin Contact:	SARAH E CHAPMAN REGULATORY SPECIALIST E-Mail: SARAH_CHAPMAN@OXY.COM Cell: 281-642-5503 Ph: 713-350-4997	SARAH E CHAPMAN REGULATORY SPECIALIST E-Mail: SARAH_CHAPMAN@OXY.COM Cell: 281-642-5503 Ph: 713-350-4997
Tech Contact:	SARAH E CHAPMAN REGULATORY SPECIALIST E-Mail: SARAH_CHAPMAN@OXY.COM Cell: 281-642-5503 Ph: 713-350-4997	SARAH E CHAPMAN REGULATORY SPECIALIST E-Mail: SARAH_CHAPMAN@OXY.COM Cell: 281-642-5503 Ph: 713-350-4997
Location:		
State:	NM	NM
County:	LEA	LEA
Field/Pool:	MESA VERDE WOLFCAMP	MESA VERDE
Well/Facility:	MESA VERDE WC UNIT 7H Sec 17 T24S R31E SESW 280FSL 1421FWL 32.210968 N Lat, 103.700699 W Lon	MESA VERDE WC UNIT 7H Sec 17 T24S R32E SESW 280FSL 1421FWL 32.210968 N Lat, 103.700699 W Lon