Form 3160-5 (April 2004)	UNITED STATES	S INTERIO <b>QCD</b>	-ARTESIA	FO OM	RM APPROVED - B No. 1004-0137 res: March 31, 2007	
RECEIVED   BUREAU OF LAND MANAGEMENT				5. Lease Serial No.		
JAN 1 800 not use ti	PORTS ON W o drill or to re	-enter an		ottee or Tribe Name		
abandoned w	ell. Use Form 3160-3 (/	APD) for such p	roposals.			<del>,</del>
SUBMIT IN TR	ructions on reve	erse side.	7. If Unit or CA	Agreement, Name and/or	: No.	
1. Type of Well Oil Well Gas Well Other				8. Well Name ar		
2. Name of Operator OXY USA WTP LP			192463	North Indian Basin Unif#19 9. API Well No.		
3a Address P.O. Box 50250 Midland, TX 79710		3b. Phone No. (include area code) 432-685-5717		30-015 - 26385  10. Field and Pool, or Exploratory Area		
4. Location of Well (Footage, Sec.,			Dagger Draw, S. Up. Penn (Assoc)			
99075L 1986 FE	II TZIS (	I Tais Rase		11. County or Parish, State  Eddy WM		
12. CHÈCK A	PPROPRIATE BOX(ES) TO	INDICATE NATU	JRE OF NOTICE, I	REPORT, OR OT	HER DATA	
TYPE OF SUBMISSION		T	YPE OF ACTION			
Notice of Intent	Acidize Alter Casing	Deepen Fracture Treat	Production (S	tart/Resume)	Water Shut-Off Well Integrity	
Subsequent Report Casing Repair		New Construction Recomplete		Other		
Final Abandonment Notice	Final Abandonment Notice Convert to Injection		Temporarily A			
determined that the site is read  12/29/11 MIRU, NDWH, N  12/30/11 RIH & tag Cmt/C  40sx CL C cmt @  1/2/12 RIH & tag cmt @  WOC. RIH w/ W  pressure to 2000  1/3/12 RIH to 2524', M&  1245', POOH. R  1293', M&P 40sx  1/4/12 RIH w/ WL & tag  1500# w/ no loss	UBOP, RIH w/ tbg IBP @ 7444', circ hole w/ 0 6217', PUH, WOC	thed only after all required to the multiple of the multiple o	Frements, including rectains from the first control of the first control	Liability un Surface resi TOC 7295', PU cmt w/ 2% CaC cr & set @ 2114 L & tag cmt @ 2 no loss, rel pkr, loss, attempt to E / full returns out	molecular in the operation of the foration is complete to a complete. He to 6217', M&P complete with the first section of the first sec	dauntil ed. •
14. I hereby certify that the foregoing is true and correct Name (Printed/Typed)			RECLAMATION			
David Stewart		Title	Regulatory Advisor	DUE 7-2-43		
Signature Va.	Shil	Date	115/1	200CDT	ה בטם מבנ	מחמי
	THIS SPACE FOR	FEDERAL OR	STATE OFFIC	EUSELTI	U TUN NEC	עווטי
Approved by  Conditions of approval, if any, are attached. Approval of this notice does not warrancertify that the applicant holds legal or equitable title to those rights in the subject lewhich would entitle the applicant to conduct operations thereon.  Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any States any false, fictitious or fraudulent statements or representations as to any matter.			Title Office	Date JA	Page 1	
	as to anymatter within	knowingly and willfull its jurisdiction.	v to make to cany de	AD AD EIEI D DEEIU	e Ellipited	
(Instructions on page 2)  Accepted for record NMOCD						