Form 3160-5 (August 1999)

UNITED STATES DEPARTMENT OF THE INTERIOR

BUREAU OF LAND MANAGEMENT

FORM APPROVED OMB NO. 1004-0135 Expires: November 30, 2000

S-NMNM0417696 BH-NMNM0417696

6 If Indian, Allottee or Tribe Name

5. Lease Serial No

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.

| SUBMIT IN TRIPLICATE - Other instructions on reverse side | | | | 7. If Unit or CA/Agreement, Name and/or No | | |
|--|----------------------------------|------------------|-----------------------------|---|--------------------------|-------|
| 1 Type of Well | | | | | | |
| X Oil Well Gas Well Other | | | | 8 Well Name Lost Tank | | |
| 2 Name of Operator OVV JISA Tro | | | | Federal | | |
| OXY USA Inc. 16696 3a Address 3b Phone No (include area code) | | | | 9 API Well N | | |
| P.O. Box 50250, Midland, TX 79710-0250 | | 432-685-5717 | | 30-015- 37959 10 Field and Pool, or Exploratory Area | | |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey L | 432 003 371 | <u>/</u> | Lost Tank Delaware, West | | i | |
| SL. 400 FSL 250 FEL SESE | | Sec 3 T22S R | 31F | LUSC TUIK | belaware, west | |
| BH. 741 FWL 1021 FEL NEWE | | | 11. County or Parish, State | | | |
| BH THE TOXT LE PENE | Sec 10 T22S R | 31E | Eddy | NMNM | | |
| 12. CHECK APPROPRIATE | BOX(ES) TO INC | ICATE NATURE O | F NOTICE, REP | ORT, OR OT | HER DATA | |
| TYPE OF SUBMISSION | | | TYPE OF ACTION | | | |
| Notice of Intent | Acidize | Deepen | X Production | ı (Start/Resume) | Water Shut-Off | |
| | Alter Casing Fracture Treat Recl | | Reclamati | 01) | Well Integrity | |
| X Subsequent Report | | | n Recomple | 10 | Other | |
| | Change Plans | Plug and Abando | = : | lly Abandon | | |
| Final Abandonment Notice | | | Ξ. | • | | |
| | Convert to Injection | on Plug Back | Water Dis | posal | | |
| testing has been completed. Final Abandonment Metermined that the final site is ready for final inspection. This well was completed, tested a | ection) | | - | | | л наѕ |
| the NMOCD C-104 (Authorization to | Transport). T | he C-104 was app | roved 9/8 | \((ar | nd the well | |
| returned to production 9 4 | <u>(</u> | | E () (5 No. | | ND DE00DD | |
| RECEIVED | | | AUUL | PIEDFU | OR RECORD | i |
| OCT 25 2011 | | | | | | į. |
| | | | | DOT 0.0 | 2011 | ;; |
| | 1 | ì | | OCT 22 | (200) | |
| • • • • | NMOCD AR | TESIA | | 1 am | | |
| | | | | / | MANAGMENT | |
| 14. I hereby certify that the foregoing is true and correct Name (<i>Printed/Typed</i>) | | Title | | CARLSBAD FIE | MANAGEMENT FLD OFFICE | 1 |
| David Śtewart | | Regi | latory Adviso | r | | · . |
| On Stat | | Date | 10/19/11 | | • | |
| THIS | SPACE FOR FED | ERAL OR STATE (| OFFICE USE | | | |
| Approved by | | Title | | I. | Date | |
| Conditions of approval, if any, are attached. Approval o | of this notice does not w | arrant or Office | | | | |
| certify that the applicant holds legal or equitable title to which would entitle the applicant to conduct operations the | those rights in the subj | ect lease | | | | |

OCD-ARTESIA