Form 3160-5

	DEPARTMENT OF	THE INTERIOR	OCD Artesia		OM B No. 1004-0137 Expires: March 31, 2007	
	BUREAU OF LAND			5. Lease Ser		
	NOTICES AND				n, Allottee or Tribe Name	
Do not use the abandoned w	his form for propos vell. Use Form 3160	sais to drill or -3 (APD) for s	to re-enter an uch proposals.	o. II mua	i, Another of The Panie	
SUBMIT IN TR	RIPLICATE- Other	instructions o	reverse side.	7. If Unit o	or CA/Agreement, Name and/or No.	
1. Type of Well Oil Well	Gas Wellt O	ther		Q Well No	ame and No.	
2. Name of Operator OXY USA Inc.		16696			14427 Federal #51	
3a. Address		3b. Phone No. (include area code)		30-0	515-39431	
P.O. Box 50250 Midland, TX 79710 4. Location of Well (Footage, Sec., T., R., M., or Survey Descr		432-685-5717 ·			10. Field and Pool, or Exploratory Area Harmoun Ranch Delaware & E	
5-906 FSL 459 F	WL SWSW(M) Sec 27 T	235 R29E	11. County	or Parish, State	
BH:354 FWL 647 F			ι (τ	Ede	the mm	
12. CHECK A	PPROPRIATE BOX(E	S) TO INDICATE	NATURE OF NOTICE	, REPORT, O	R OTHER DATA	
TYPE OF SUBMISSION			TYPE OF ACTION	1		
Notice of Intent	Acidize Alter Casing	Deepen Fracture T		(Start/Resume)	Water Shut-Off Well Integrity	
Subsequent Report	Casing Repair	New Cons			Other Completion	
Final Abandonment Notice	Change Plans	Plug and A	r 1 -	ly Abandon		
T man / toundomment i water	Convert to Injection	n Plug Back	Water Disp	posal ⁻		
	inal Abandonment Notices s ly for final inspection.)	shall be filed only after	all requirements, including r	eclamation, have be	val, a Form 3160-4 shall be filed once the completed, and the operator has a 3050', drill out	
tool, test csg to 100		1	· ·	_		
good. CO to 10271'	, RIH & run CBL fro	m 6850'-surfac	e. Pressure test cs	g to 6350′, he	eld for 30min,	
tested good. 10/26	/12. RU 12/19/12,	test intermedia	ate csg @ 500# for	30 min, then	1000# for 30 min,	
tested good. Perf @	9 10200-9500, 915	2 8450 <i>,</i> 8102-7	400′ Total 117 hole	es. Frac w/ 90	6726g Treated Wtr	
+ 12096g 15% HCl a	•					
csg @ 500# for 30 m	·		_	_	5300# for 30 min,	
tested good. Swab,	RIH w/ ESP & 2-7/	8" tbg & set @	6060', test well for	potential.	RECEIVED	
14. Thereby certify that the for	egoing is true and correct	i i			FEB 0 5 2013	
Name <i>(Printéd/Typed)</i> David Stewart			Title Regulatory Advi	sor -	NMOCD ARTESIA	
	11	1		- C % CHR	WINDOW ALLES	
Signature			Date US		THE TON NEOUN	
	THIS SPACE F	OR FEDERAL	OR STATE OFF	ICE USE		
Approved by			Title		FEB 2 2013	
Conditions of approval, if any, are attached. Approval of thi			or		lanes	
certify that the applicant holds leg which would entitle the applicant				RIDE	AU OF LAND MANAGEMENT	
			person knowingly and will person knowingly and will person knowingly and will person within its jurisdiction.	llful to make toCe	myldepartinent lor lageney to Ethe Unit	
(Instructions on page 2)	A					



