Form 3160-5 (April 2004)

## **UNITED STATES** DEPARTMENT OF THE INTERIOR

BUREAU OF LAND MANAGEMENT

FORM APPROVED OM B No 1004-0137 Expires: March 31, 2007

| 5 | Lease | Senal | No |
|---|-------|-------|----|

|   |  |                                     |                              |  | 3 Lease Ser                                 |  | _               |             |  |  |
|---|--|-------------------------------------|------------------------------|--|---|--|-----------------|-------------|--|--|
| 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.  |  |                                     |                              |  |   | NM-38463                                     |                 |             |  |  |
|   |  |                                     |                              |  | 6 If Indian, Allottee or Tribe Name         |  |                 |             |  |  |
| SUBMIT IN TRIPLICATE- Other instructions on reverse side.   |  |                                     |                              |  | 7 If Unit or CA/Agreement, Name and/oi No   |  |                 |             |  |  |
| 1 Type of Well ☐ ☐ Gas Well ☐ ☐ Other   |  |                                     |                              |  | 8. Well Na                                  | ame and No.                                  |                 |             |  |  |
| 2 Name of Operator OXY USA INC.   |  |                                     |                              |  | Pure Gold BFederal No. 01<br>9 API Well No. |  |                 |             |  |  |
| 3a Address 1017 W. Stanolind Rd., Hobbs, N  | 3b. Phone No. (include area code) 575-397-8247   |                                     |                              | 30-015-27237/<br>10. Field and Pool, or Exploratory Area |   |  |                 |             |  |  |
| 4 Location of Well (Footage, Sec., T., R., M., or Survey Description)   |  |                                     |                              |  |   | Wildcat Delaware  11 County or Parish, State |                 |             |  |  |
| 0-20-235-31   | IE, 660 FSL  | \$ 1650                             | ) FEI                        |  |   | 1 Count                                      |                 |             |  |  |
| 12. CHECK API   | PROPRIATE BOX(ES) TO   | INDICATE                            | NATURE                       | OF NOTICE,   | REPORT, O                                   | R OTHER DA                                   | \ТА             |             |  |  |
| TYPE OF SUBMISSION TYPE OF ACTION   |  |                                     |                              |  |   |  |                 |             |  |  |
| Notice of Intent  Subsequent Report  Final Abandonment Notice   | Report Casing Repair New Construction Recomplete  Change Plans Plug and Abandon Temporarily Aban |                                     |                              |  |   | Water Shi                                    |                 | ment        |  |  |
| ccepted for recor   | OR FINAL ABANDONMEN  |                                     |                              |  |   |  |                 | 1           |  |  |
| NMOCD REC   |  | EIVED ACCE                          |                              |  | PIEDF                                       | OR RE  | CORD            |             |  |  |
| DEC 02 2011 NOV   |  | <b>2 2</b> 2011                     |                              |  |   | 9 /01  | 7               |             |  |  |
|   | INMOCE   | ARTES                               | IA                           | DIV  | 1 Bm  |  |                 |             |  |  |
| 14. I hereby certify that the foreg   | oing is true and correct   |                                     |                              |  |   | D MANAGEN                                    |                 |             |  |  |
| Name (Printed/Typed)  Dusty L. Wilson   |  |                                     | Title HES Specialist         |  |   | ELD OFFICE                                   |                 |             |  |  |
| Signature   |  | 7                                   | Date                         |  | 09/21/2011                                  |  |                 |             |  |  |
| 1/249   | THIS SPACE FOR   | FEDERAL                             |                              | ATE OFFIC  | EUSE  |  |                 |             |  |  |
| <del></del>   |  |                                     | <del></del>                  |  |   |  |                 | <del></del> |  |  |
| Approved by   | . <b></b>  |                                     | Title                        | ;  |   | Date   |                 |             |  |  |
| 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   |   |  |                 |             |  |  |
| Title 18 USC. Section 1001 and Title States any false, fictitious or fraudule   | 43 USC. Section 1212, make it and statements or representations                                  | a crime for any<br>as to any matter | person know<br>within its ju | ingly and willfu   | lly to make to a                            | ny department o                              | r agency of the | e United    |  |  |

(Instructions on page 2)