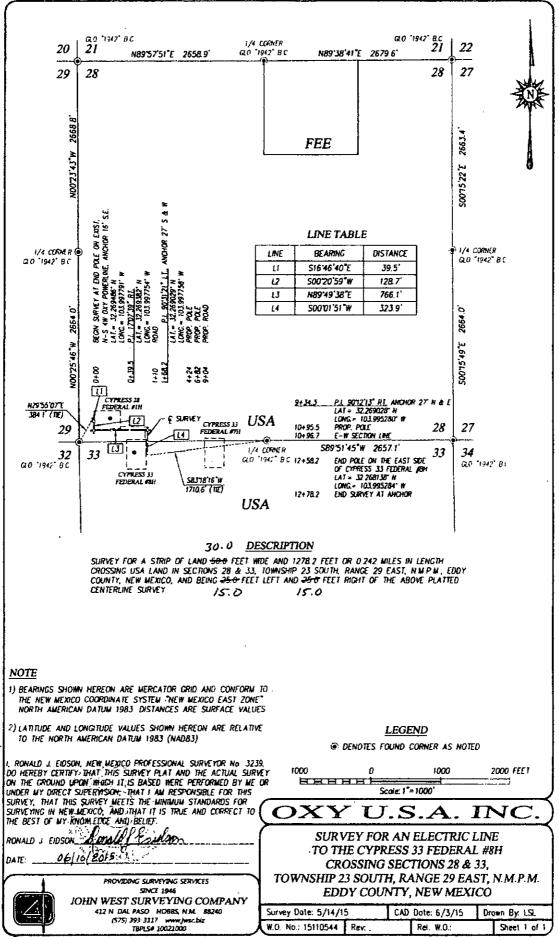
(August 2007) DE	UNITED STATE	S	FORM OMB N Expires	I APPROVED NO. 1004-0135 :: July 31, 2010	
BUNDRY Do not use thi abandoned we	UREAU OF LAND MAN/ NOTICES AND REPO is form for proposals to II. Use form 3160-3 (Al	AGEMENT CALISDA ORTS ON WELLS o drill or to re-enteral PD) for such proposals.	FORM OMB 1 Expires Fase Serial No. Formation of the serial	or Tribe Name	
		ctions on reverse side.		eement, Name and/or No.	
				8. Well Name and No. CYPRESS 33 FEDERAL 8H	
 Type of Well Gas Well Other 					
2. Name of Operator Contact: NICK BOUTERIE OXY USA INC. E-Mail: Nicholas_Bouterie@Oxy.com		Bouterie@Oxy.com	9. API Well No. 30-015-43075		
3a. Address3b. Pho5 GREENWAY PLAZA SUITE 110Ph: 7HOUSTON, TX 77046Ph: 7		3b. Phone No. (include area cod Ph: 713-350-4922	e) 10. Field and Pool, o BONE SPRING	10. Field and Pool, or Exploratory BONE SPRING	
4. Location of Weil (Footage, Sec., T., R., M., or Survey Description)			11. County or Parish, and State		
Sec 33 T023S R029E Mer NMP NWNW 150FNL 780FWL			EDDY COUNTY, NM		
12. CHECK APPI	ROPRIATE BOX(ES) T	O INDICATE NATURE OF	NOTICE, REPORT, OR OTHE	ER DATA	
TYPE OF SUBMISSION		TYPE OF ACTION			
🛛 Notice of Intent	Acidize	Deepen	Production (Start/Resume)	□ Water Shut-Off	
,	□ Alter Casing	Fracture Treat	Reclamation	Well Integrity	
Subsequent Report	🗖 Casing Repair	New Construction	Recomplete	Other Right of Way	
Final Abandonment Notice	Change Plans Convert to Injection	Plug and Abandon Plug Back	Temporarily Abandon Water Disposal	Right of Way	
If the proposal is to deepen direction	ally or recomplete horizontally	, give subsurface locations and measurements	ng date of any proposed work and appro sured and true vertical depths of all perti (A. Required subsequent reports shall b	inent markers and zones.	
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** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED **



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