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 Serial No.	
SUNDRY	PORTS ON V	VELLS	WMNM 27725	
Do not use th	o drill or to i APD) for such	e-enter an	6. If Indian, Allottee or Tribe Name	
SUBMIT IN TR	IPLICATE- Other instr	uctions on re	HOBB Side CD	7. If Unit or CA/Agreement, Name and/or No.
1. Type of Well Gas Well Other		(APR 27 2012	8. Well Name and No.
2. Name of Operator OXY USA Inc.		(16696	M. C. Stewart #3 9. API Well No.
3a. Address P.O. Box 50250 Midland, TX 79710		3b. Phone No. (inc 432-685-5717	lude area code)	30- 025 - 22469
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)		L	/	Lengl: e Mattix Roug-B 11. County or Parish, State
660F5L 1930 F	el suse(0) si	ec 28 T 23	S R37E	Lee WM
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER 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 Casing Repair New Construction Recomplete Other Change Plans Plug and Abandon Temporarily Abandon			
Final Abandonment Notice	Change Plans	Plug and Aband	Water Dispos	
following completion of the in-	volved operations. If the operation in a Abandonment Notices shall be	results in a multiple o	ompletion or recompletic	uired subsequent reports shall be filed within 30 days on in a new interval, a Form 3160-4 shall be filed once amation, have been completed, and the operator has
25sx CL C cmt, Calc 3/28/12 RIH w/ tbg & tag cmt returns up 8-5/8" X 5- @ 300', EIR & sqz 85	I TAC, POOH w. tbg. R TOC-3113', PUH to 260 @ 2358', POOH, RIH w.	00', spot 25sx 0 / WL & perf @ nt, WOC. Rel	CI C cmt, PUH, W 1200', POOH. F pkr, PUH to 30', I	10# MLF, RIH & tag CIBP @ 3360', spot VOC. RIH & set pkr @ 690', EIR @ 2BPM w/ fu RIH w/ WL & tag cmt @ 795', PUH & per
3/29/12 RDPU	ON 2		epted as to plugging of the well bore. Wility under bond is retained until face restoration is completed.	
14. I hereby certify that the fore Name (Printed/Typed)	egoing is true and correct			
David Stewart		Titl	Title Regulatory Advisor	
Signature La S		Da	· 3/29/	CCEPTED FOR RECORD
	THIS SPACE FOR	FEDERAL O	R STATE OFFIC	EUSE
Approved by Conditions of approval, if any, are certify that the applicant <u>holds</u> lega			Title	APR 2 4 2012
which would entitle the applicant to	o conduct operations the pron			BURFAIL OF LAND MANAGEMENT

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(Instructions on page 2)

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