Form 3160-5 (April 2004)			E INTERIOR	5. Lease Seria	FORM APPROVED OM B No. 1004-0137 Expires: March 31, 2007		
Do ne	UNDRY NOTICES ot use this form for doned well. Use For	6. If Indian, Allottee or Tribe Name					
SUBMI	T IN TRIPLICATE	7. If Unit or CA/Agreement, Name and/or No. 8. Well Name and No. Bootles Gin Federal Count Ith. 9. API Well No.					
1. Type of Well Oil We	ll. Gas Welli						
2. Name of Operator O	XY USA Inc.						
3a. Address P.O. Box 50250 M				3b. Phone No. (include area code) 432-685-5717		30-025-40306 10. Field and Pool, or Exploratory Area	
S-1800FSL BH. 1650FSL	otage, Sec., T., R., M., or Sur 330 FWL NW - 330 FEL NES HECK APPROPRIATE	sώ(ι) 5 SE(Ι)	te te	RE OF NOTICE, R	11. County o	r Parish, State WM OTHER DATA	
TYPE OF SUBMIS	SSION		TY				
Notice of Intent Subsequent Report	t Nation	Repair	Deepen Fracture Treat New Construction Plug and Abandon Plug Back	Production (St Reclamation Recomplete Temporarily Al Water Disposal	'	Water Shut-Off Well Integrity Other <u>Speed</u> , set <u>CSS</u> <u>a</u> Curt	
If the proposal is to Attach the Bond un following completic testing has been cor	deepen directionally or recor der which the work will be p on of the involved operations	nplete horizontal erformed or provi . If the operation t Notices shall be	y, give subsurface locati de the Bond No. on file results in a multiple corr	ons and measured and tru with BLM/BIA. Requir poletion or recompletion	ne vertical depths ed subsequent rep in a new interval.	k and approximate duration thereof. of all pertinent markers and zones. ports shall be filed within 30 days a Form 3160-4 shall be filed once completed, and the operator has	

Spud 17-1/2" hole 8/7/12, drill to 1035'. RIH & set 13-3/8" 48# H-40 STC csg @ 1034', cmt w/ 920sx (284bbl) PPC w/ additives followed by 440sx (106bbl) PPC, circ 732sx (226bbl) cmt to surf. WOC. Test BOP's @ 250# low 5000# high. 8/10/12, RIH & tag cmt @ 984', circ hole, pressure test csg to 1210# for 30min, tested good.

14. I hereby certify that the foregoing is true and correct Name (Printed/Typed)	<u></u>						
David Stewart		Title Regulatory Advisor					
Signature Uni Stat	Date	8/14/1	(Z				
THIS SPACE FOR FEDERAL OR STATE OFFICE USE							
Approved by Conditions of approval, if any, are attached. Approval of this notice does not warran	 1t or	Title		Date			
certify that the applicant holds legal or equitable title to those rights in the subject lea which would entitle the applicant to conduct operations thereon.	Office						
Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.							
(Instructions on page 2) MW/OCD 09-07-201	2			1 0 2012			

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