Form 3160-5 (August 1999)

UNITED STATES DEPARTMENT OF THE INTERNAL. OII Cons. Division BUREAU OF LAND MANAGEMES 25 N. French Dr.

SUNDRY NOTICES AND REPORTS ON BELLET 88240

Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

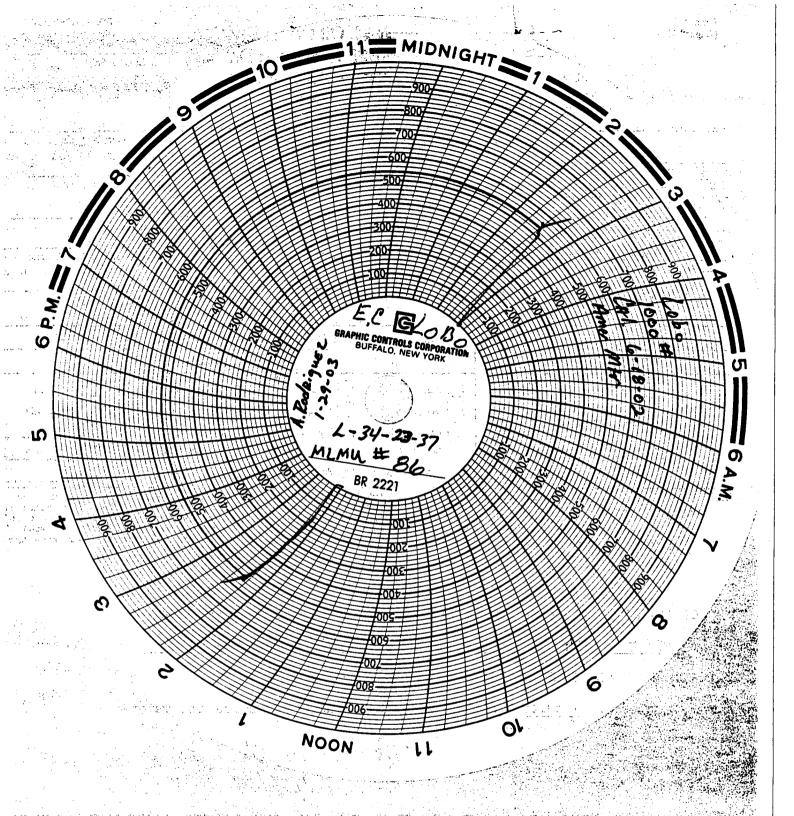
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FORM APPROVED OMB NO. 1004-0135 Expires: November 30, 2000

5. Lease Serial No.

8910138170 - LCOG 8258
6. If Indian, Allottee or Tribe Name

abandoned well. Use runn 5100-5 (Ar D) für süch proposais.					
SUBMIT IN TRIPLICATE - Other instructions on reverse side				7. If Unit or CA/Agreement, Name and/or Myers Langlie Mattix Unit	
1. Type of Well Oil Well Gas Well YOther Injection				8. Well Name and No.	
2. Name of Operator				86	
OXY USA WTP Limited Partnership 192463				9. API Well No.	
3a. Address 3b. Phone No. (include area code)			30-025- 10954		
P.O. Box 50250, Midland, TX 79710-0250 915-685-5717			10. Field and Pool, or Exploratory Area		
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)				Langlie Mattix 7Rvr Qn-GB	
1980 FSL 660 FWL NWSW (L) 34-23-37				11. County or Parish, State	
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REF				Lea NM	
	BOX(ES) TO INL	· · · · · · · · · · · · · · · · · · ·		JRT, 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	n X Well Integrity	
X Subsequent Report	Casing Repair	New Construction	Recomplete		
	Change Plans	Plug and Abandon	X Temporarily		
Final Abandonment Notice	Convert to Injection		Water Dispo		
	Convert to Injection	II I riug Dack	Water Dispa	RAI	
1. Notify BLM/NMOCD of casing into 2. RU pump truck 1/29/03, circ to 5/0 # for 30 min. 14. I hereby certify that the foregoing is true and correct	arily abandon the Perfs-3427 egrity test 24hrulate well with	1-3522 Pkr/	CIBP 335	2303107723334 State 10 10 10 10 10 10 10 10 10 10 10 10 10	
Name (Printed/Typed) David Stewart			gulatory Ana	lvet	
David Stewart	 	Date Si . Res	2/25/03		
Wa She	CRACE FOR TER		.)	
	SPACE FOR FED	ERAL OR STATE OFF		ID.	
Conditions of approval, if any, are attached. Approval of certify that the applicant holds legal or equitable title to which would entitle the applicant to conduct operations the Title 18 U.S.C. Section 1001, and Title 43 U.S.C. Section	those rights in the subjecteon.	urrant or Office	nd willfully to mak	1 7629/03	
States any false, fictitious or fraudulent statements or rep			me winteny to mak		



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