Form 3160-5 (April 2004)

UNITED STATES OCD-HOBBS TMENT OF THE INTERIOR HOBBS OCD

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

DEPARTMENT OF	THE INTERIOR
BUREAU OF LAND	MANAGEMENT

LC 062300

DEPARTMENT OF THE INTERIOR	A 12	Expir
BUREAU OF LAND MANAGEMENT . 32 2	11/32	Lease Serial No.
BUREAU OF LAND MANAGEMENT SUNDRY NOTICES AND REPORTS ON WELL\$AND Do not use this form for proposals to drill or to re-enter an	L	LC 06:
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.	6	If Indian, Allo
abandoned well. Use Form 3160 - 3 (APD) for such proposals.	150	

6. If Indian, Allottee or Tribe Name

abandoned well. Use Form 316	0-3 (APD) for su	ch proposals.	CEIVED				
SUBMIT IN TRIPLICATE- Othe		7. If Unit or CA/Agreement, Name and/or No.					
1. Type of Well ☐ Gas Well ☐ ☐	Other /		9 Well N	Jome and Ma			
2. Name of Operator OXV USA Inc.	Cotto	8. Well Name and No. Cotton Draw Unit #020 9. API Well No.					
3a. Address 1017 W. Stanolind Rd., Hobbs, NM 88240		3b. Phone No. (include area code)			30-025- 08 9 1		
4. Location of Well (Footage, Sec., T., R., M., or Survey Desc.	i .		Pad	ty or Parish, State	aware /		
D-15-255-32E, 660FNI	L & VLOFU	UL /		County	NW.		
12. CHECK APPROPRIATE BOX(I	ES) TO INDICATE	NATURE OF NOTION	Œ, REPORT, C	OR OTHER DA	TA		
TYPE OF SUBMISSION		TYPE OF ACTION	ON	_			
Notice of Intent Notice of Intent Subsequent Report Final Abandonment Notice Alter Casing Casing Repair Change Plans Convert to Injective	Deepen Fracture Tro New Const Plug and Al ion Plug Back	eat Reclama	lete arily Abandon	Water Shut Well Integ			
Attach the Bond under which the work will be performed following completion of the involved operations. If the otesting has been completed. Final Abandonment Notices determined that the site is ready for final inspection.) ALL REQUIREMENTS FOR FINAL ABANDO	peration results in a multi shall be filed only after a	ple completion or recom Il requirements, includin	pletion in a new inter g reclamation, have b	val, a Form 3160-4 een completed, and	shall be filed once		
			ACCE	PTED FO	R RECORD		
				DEC 28	0		
			BURY.	AU OF LAND ARLSBAD FIE	MANAGEMENT . LD OFFICE		
14. I hereby certify that the foregoing is true and correct Name (Printed/Typed)	et			 	 -		
Dusty L. Wilson		Title HES Specialist					
Signature Lex Loy		Date	. 09/21/2011				
THIS SPACE	FOR FEDERAL	OR STATE OF	FICE USE				
Approved by		Ti+1.		Date			
Approved by Conditions of approval, if any, are attached. Approval of this certify that the applicant holds legal or equitable title to those which would entitle the applicant to conduct operations there	e rights in the subject lea		.	Date	Open		
Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, States any false fictitious or fraudulent statements or representations.		person knowingly and v	villfully to make to	any department or	agency of the United		

MUB/OCD 1/4/2013 (Instructions on page 2)