	-		
:			No OIL CONS COMMISSION
			6 0
Form 3160-5		ED STATES	Arteria, Mager Bureau No. 1004-0135
June 1990)		T OF THE INTERIOR	Expires: March 31, 1993
	BUREAU OF L	AND MANAGEMENT	5. Lease Designation and Serial No.
			NUMICOST 4898-NUMNM84603X
-		AND REPORTS ON WELLS	6. If Indian, Allottee or Tribe Name
Do not use thi		Il or to deepen or reentry to a different r	eservoir.
	Use "APPLICATION FOR	PERMIT—" for such proposals	
			7. If Unit or CA, Agreement Designation
SUBMIT IN TRIPLICATE CENVED			Castral Carbin Quear Unit
1. Type of Well			
	Well M Other Injectie	n Well	8. Well Name and No.
2. Name of Operator	-		204
(OXY USA Inc.	166	
3. Address and Teleph	one No.	DIA OPA CONI, DIA	-5717 30-025-29738 -5717 10. Field and Pool, or Exploratory Area
I	P.O. Box 50250 M	idland, TX 0121CON15085	
4. Location of Well (F	Footage, Sec., T., R., M., or Survey De	scription) DIST. 2	Corbin Quear, Central
			11. County or Parish, State
1950 FSC	660 FFL NESE	Sec 4 T185 R33E	
1.001.0-			
12 CHEC	CK APPROPRIATE BOX	5) TO INDICATE NATURE OF NOTICI	E. REPORT, OR OTHER DATA
- <u> </u>		······································	
TYPE	OF SUBMISSION		
No	Nice of Intent	Abandonment	Change of Plans
		Recompletion	New Construction
🛛 Sul	bsequent Report	Plugging Back	Non-Routine Fracturing
		Casing Repair	Water Shut-Off
🗌 Fir	nal Abandonment Notice	Altering Casing	Conversion to Injection
		X Other Test The Reset	PKC. Dispose Water
		•••••••••••••••••	(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form 1
13. Describe Proposed (or Completed Operations (Clearly state al	pertinent details, and give pertinent dates, including estimated	d date of starting any proposed work. If well is directionally drilled,
give subsurfac	e locations and measured and true vertic	al depths for all markers and zones pertinent to this work.)*	
	TI) - 4350'	BTD-4314' Dents-	4200 - 4217'
MIRCI	Pu, NOWH,	NUBOP, Kel PKA & PL	OH. RIH al GuibC.C.
DKI	\$ 2 3/5 " (C The	, test to 3000 # , te	"sted OK. NP BOD.
		" fluid, set pkr 6	
NUL WIT	, cire al pr	Fluid Sei pro C	2 1103 - 1131 859
te 30	$\infty \neq$, held O	R, NMOCO notitica	, but did not witness.
Dut a	vell back or	injection 6/6/95	
			2000 C.
		A • / /	2
		Darid	Alana Sta
		pour course	Charles -
		х. Х	
			kana ana ang ang ang ang ang ang ang ang
			<u> </u>
14. I hereby certify th	hat the foregoing is true and correct		
		tewart TitleRegulatory Analyst	Date_0126 (95
Signed		riue	
(This space for Fe	ederal or State office use)		
Approved by		Title	Date
Conditions of app	iroval, il any:		\sim
Title 18 U.S.C. Sector	on 1001, makes it a crime for any person	knowingly and willfully to make to any department or agence	cy of the United States any false, fictitious or fraudulent statements
	to any matter within its jurisdiction.		\sim
		tCas Instruction on Deverse Cide	

Instruction on Reverse Side



CCQ4 Nº 204 6-6-95 C'sq integrity Test N. MOCC NotiFied, did not witness

JP-0# (°53 - 480 # suff - 0#

Tested ok 30 min

Juhn Javin Grud. Tech N. Hobbs



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