| Form 3160-5 (June 1990) | UNITED STA DEPARTMENT OF TH BUREAU OF LAND M | TES IE INTERIOR | N.A. OIL: E. LORI Hobbs, NM 1824 | Budget E Expire | RM APPROVED herose No. 1004-0135 cs: March 31, 1993 nation and Serial No. | |
|--|--|---|--|--|--|--|
| Do not use this form f | NDRY NOTICES AND RE for proposais to drill or to c APPLICATION FOR PERMI | leepen or reentry | to a different reserv | 6. If Indian, A | <u>03K - MILCOZIYB9H</u> Honee or Tribe Name | |
| SUBMIT IN TRIPLICATE | | | | | 7. If Unit or CA. Agreement Designation Central Corbin Queen Unit | |
| I. Type of Well I. Type of Well Gas Well | Other | | | 8. Well Name a | 8587 | |
| 2. Name of Operator OXY USA Inc. 16696 | | | | 9. API Well No | <u>105</u> | |
| 3. Address and Telephone No. P.O. Box 50250 | Midland, TX 797 | 10-0250 | 915-685- 57 | | 5-29898 vol. or Exploratory Area (329) | |
| | T., R., M., or Survey Description) DFEL NUSE (T, | 1 Sec 9 Th | 185 R33E | <u>Corbini</u> 11. County or Lea | Queen, Central Parish, Souce WM | |
| 12. CHECK APP | ROPRIATE BOX(s) TO IN | DICATE NATU | RE OF NOTICE, RE | PORT, OR OTH | HER DATA | |
| TYPE OF SUB | TYPE OF SUBMISSION TYPE OF ACTION | | | | | |
| Notice of Inter | | Abaadoame Recompleti Plugging B Casing Rep | on ack | | nstruction itine Fracturing | |
| Final Abandon | | | A STIATUS | (Note: Report of Completion or | esuits of multiple completion on Well Recompletion Report and Log form.) | |
| give subsurface locations | and measured and true vertical depths fo | r all markers and zones p | pertinent to this work.)* | | | |
| APPROV THIS W | A INC. REQUESTS AL. FUTURE PLAN OULD ALLOW US TO A CASING INTEGR | S ARE TO R USE THIS N ITY TEST | EVIEW THE WAT WELL FOR WATE <u>8/24/96</u> . | ERFLOOD PA' R INJECTIO | TTERN AND N. IT | |
| | | Afpr(Endi | DVED FOR 12 NG 08-34-9 | MCRU (F) | | |
| 14. I hereby certify that the foreg | oing is true and correct | David | Stewart | | | |
| Signed | DJ DAVID R. GLASS | Tide <u>Regula</u> | itory Analyst | Date | <u>10/13/97</u> OCT 10 1 | |
| | | | | | | |

*See Instruction on Reverse Side

101116 A 5:13