	UNIT STATES EPARTMEN. JF THE INTERIOR BUREAU OF LAND MANAGEMENT			FORM APPROVED OMB No 1004-0135 Expres July 31, 1996		
		S ON WELLS	VELLS P.O. Box 1980		8910138170 - LC 060 825年	
Do not use the abandoned we	Y NOTICES AND REPORTS is form for proposals to drill oll. Use Form 3160-3 (APD) fo	l or to re-e nter a or such proposali	Hobbs, NM 8824	6. If Indian,	Allottee or Tribe Name	
SUBMIT IN TRIPLICATE - Other Instructions on reverse side			7. If Unit or CA/Agreement, Name and/or No. MYERS LANGLIE MATTIX UNIT			
Type of Well Oil Well Gas Well	Other The Lines			8. Well Nan	11007	
Name of Operator OXY USA Inc. 16696			9. API Well No.			
Address P.O. BOX 50250 3b. Phone No. (include a				30-025-	10958	
MIDLAND, TX 79710-0250 915-685-5717			5717		Pool, or Exploratory Area 37240 E MATTIX 7 RVRS Q-G	
Location of Well (Footage, Sec., T., R., M., or Survey Description)					r Parish, State	
990 FAL 330 FWL NWNW(D) Sec 34 TZ35 R37E			37E	LEA	NM	
12. CHECK AP	PROPRIATE BOX(ES) TO IN	IDICATE NATU	RE OF NOTICE, R	EPORT, OR	OTHER DATA	
TYPE OF SUBMISSION		TY	PE OF ACTION			
Notice of Intent	Acidize	Deepen Fracture Treat	 Production (Star Reclamation 	t/Resume)	Water Shut-Off	
Subsequent Report	Casing Repair	New Construction			Other	
Final Abandonment Notice	Change Plans	Plug and Abandon Plug Back	Water Disposal	andon	<u> </u>	
TD - <u>3598</u> OXY USA I EXPANSION	PBTD - <u>3540</u> F NC. REQUESTS TO TH OF THE WATERFLOOD	PERFS - <u>3424</u> EMPORARILY DUNIT.	ARANDON TH	IS WELL	FOR FUTURE	
-	ED BLM/NMOCD OF CA P TRUCK <u>40368</u> , MIN.		GRITY TEST. TEST CASING	το <u>5</u> ∞	APR 1 3 1999	
	ung is true and correct					
Name (Printed/Typed)	Dung is true and correct VID STEWART	Title	REGULAT	ORY ANALY	YST	
Name (Printed/Typed)		Title Date			YST	
Name (Printed/Typed) DA	VID STEWART	Date		z(98 E		
Name (Prinied/Typed) DA' Signature	VID STEWART	Date DR FEDERAL OR	ור	z(98 E		
DA Signature Den' Approved by Conditions of approval, if any, a	VID STEWART THIS SPACE FO	Date DR FEDERAL OR	7 (STATE OFFICE US Title Office	z(<u>98</u> E	APPROVED DatePETER W. CHESTER	
Name (Printed/Typed) DA Signature	THIS SPACE FO	Date DR FEDERAL OR	7 (STATE OFFICE US Title Office	z(<u>98</u> E	APPROVED DatePETER W. CHESTER	

Original Chart Kept by Charlie Pernin - NMOCD.



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