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UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

I.M. OIL CONS. COMMISSION
FORM APPROVED
P.O. BOX 1980
HOBBS, NEW MEXICO 88240

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

Type of Well <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <u>Injection</u>	5. Lease Designation and Serial No. 8910138170 - <u>NM 7488</u>
Name of Operator OXY USA Inc.	6. If Indian, Allottee or Tribe Name 14953
Address and Telephone No. P.O. Box 50250 Midland, TX 79710 915-685-5717	7. If Unit or CA, Agreement Designation Myers Langlie Mattix Unit
Location of Well (Footage, Sec., T., R., M., or Survey Description) <u>660 FSL 1980 FWL SESW Sec 5 T24S R37E</u>	8. Well Name and No. <u>178</u>
	9. API Well No. 30-025- <u>11007</u>
	10. Field and Pool, or Exploratory Area Langlie Mattix 7 Rvr Q-G
	11. County or Parish, State Lea NM

CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input type="checkbox"/> Other _____
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input checked="" type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

See Other Side

ACCEPTED FOR FILING
J. Lora

JUN 8 10 25 AM '95

RECEIVED

14. I hereby certify that the foregoing is true and correct

Signed David Stewart Title Regulatory Analyst Date 6/7/95

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____
Conditions of approval, if any:

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

*See instruction on Reverse Side

ATTACHMENT 3160-5
OXY USA INC.
MYERS LANGLIE MATTIX UNIT #178
SEC 5 T24S R37E
LEA COUNTY, NM

TD - 3621'

PBTD - 3609'

PERFS - 3439-3574'

MIRU PU 1/4/95, NU BOP, RIH & TAG @ 3595', CLEAN OUT TO 3609'.
RIH W/ GR/CCL. PERF QUEEN W/ 1SPF @ 3439-42, 3508-19, 34-47,
60-64, 70-3574' TOTAL 40 HOLES. ACIDIZE W/ 3000 GAL 15% NEFE HCL
ACID. SITP-170#, RIH W/ GUIB G-6 PKR & 2-3/8 TBG @ SET @ 3367'.
CIRC WELL W/ PKR FLUID, ND BOP, NUWH & TEST TO 300# FOR 30 MIN,
HELD OK, RDPU 1/5/95. SI W/O INJECTION PERMIT. PUT WELL ON
INJECTION 5/3/95 @ 55 BWPD @ 940#.

RECEIVED
15 1995
MAY 15 1995
OFFICE