

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

Hobbs, NM 88240

**SUNDRY NOTICES AND REPORTS ON WELLS**  
*Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.*

5. Lease Serial No.  
8910138170 - NM7488

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.  
MYERS LANGLIE MATTIX UNIT  
11007

8. Well Name and No.  
143

9. API Well No.  
30-025-11011

10. Field and Pool, or Exploratory Area  
LANGLIE MATTIX 7 RVRs Q-G

11. County or Parish, State  
LEA NM

**SUBMIT IN TRIPLICATE - Other instructions on reverse side**

1. Type of Well  
☐ Oil Well ☐ Gas Well ☒ Other Injection

2. Name of Operator  
OXY USA Inc. 16696

3a. Address  
P.O. BOX 50250  
MIDLAND, TX 79710-0250

3b. Phone No. (include area code)  
915-685-5717

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
1960 FNL 1905 FWL SENW(F) Sec 5 T24S R37E

**12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input type="checkbox"/> Other _____
	<input type="checkbox"/> Change Plans	<input checked="" type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including recompletion, have been completed, and the operator has determined that the site is ready for final inspection.)

**THE COMMISSION MUST BE NOTIFIED 24 HOURS PRIOR TO THE BEGINNING OF PLUGGING OPERATIONS FOR THE C-103 TO BE APPROVED.**

**MLMU #143 - INJECTION-FED**  
TD-3729' PBTD-3690' PERFS-3437-3680'

8-5/8" 24# CSG @ 349' W/ 225sx, 12-1/4" HOLE, TOC-CIRC  
4-1/2" 9.5# CSG @ 3729' W/ 335sx, 7-7/8" HOLE, TOC-2260'-CALC

1. RIH & SET CIBP @ 3387', DUMP 5sx CMT TO 3352', WOC-TAG  
2. M&P 25sx @ 2850-2750'  
3. PERF @ 1290', SQZ W/ 30sx TO 1190', WOC-TAG  
4. PERF @ 399', SQZ W/ 30sx TO 299', WOC-TAG  
5. M&P 10sx CMT SURFACE PLUG  
10# MLF BETWEEN PLUGS

**SEEKING FOR COMPLETION OF APPROVAL**

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

Name (Printed/Typed) DAVID STEWART	Title REGULATORY ANALYST
Signature <i>David Stewart</i>	Date 11/28/00

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved by (ORIG. SGD.) ALEXIS C. SWOBODA	Title PETROLEUM ENGINEER	Date NOV 30 2000
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.		Office

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.

IC (Instructions on reverse)

dp

MYERS LANGLIE MATTIX UT 143  
SEC 5 T24S R37E LEA NM

