

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

DISTRICT I

P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION

310 Old Santa Fe Trail, Room 206  
Santa Fe, New Mexico 87503

WELL API NO.	30-025-30910
5. Indicate Type of Lease	FED <input type="checkbox"/> STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name	NORTH HOBBS (G/SA) UNIT
Section	27
8. Well No.	221
9. Pool name or Wildcat	HOBBS (G/SA)

SUNDRY NOTICES AND REPORTS ON WELLS  
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"  
(FORM C-101 FOR SUCH PROPOSALS.)

1. Type of Well:	Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/> Injector <input type="checkbox"/>
2. Name of Operator	OCCIDENTAL PERMIAN, LTD
3. Address of Operator	1017 W STANOLIND RD.

4. Well Location	Unit Letter <u>E</u> : <u>2267</u> Feet From The <u>North</u> Line and <u>505</u> Feet From The <u>WEST</u> Line
	Section <u>27</u> Township <u>18S</u> <u>38E</u> NMPM LEA County
10. Elevation (Show whether DF, RKB, RT GR, etc.)	3633' GL

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG & ABANDONMENT <input checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER: <input type="checkbox"/>	OTHER: <input type="checkbox"/>

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

NOTIFY THE NMOCD ( 24 hrs) BEFORE RIG UP. (393-6161)

SET 5.5" CIBP @4380'. TOP PERF @4430'.  
CAP CIBP W/35' CMT. TAG @4345'.  
CIRC WELL WITH M. L. F.  
SPOT 25 SXS CMT @ 2875'. Tag @ 2625'.  
SPOT 25 SXS CMT @ 1875'. Tag @ 1625'.  
CAP CSG 1/10' CMT AT SURFACE.

\*\* CUT OFF WELLHEAD AND CASING 4' BELOW GROUND LEVEL. WELD STEEL PLATE WITH LEGAL INFORMATION TO CASING 4' BELOW GROUND LEVEL.

RDPU. CLEAN LOCATION

Rig Up Date: 09/10/2001  
Rig Down Date: 09/13/2001

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Robert Gilbert TITLE SR. ENGR. TECH DATE 09/26/2001  
TYPE OR PRINT NAME R.N. GILBERT TELEPHONE NO. 505/397-8206

(This space for State Use)  
APPROVED BY [Signature] TITLE [Signature] DATE 2-14-02  
CONDITIONS OF APPROVAL IF ANY:  
GWW