

DISTRICT I

1625 N. French Drive , Hobbs, NM 88240

OIL CONSERVATION DIVISION

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

| | |
|---|---|
| WELL API NO. | 30-025-07479 |
| 5. Indicate Type of Lease | FED <input type="checkbox"/> STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil & Gas Lease No. | |
| 7. Lease Name or Unit Agreement Name | NORTH HOBBS (G/SA) UNIT |
| Section | 30 |
| 8. Well No. | 231 |
| 9. Pool name or Wildcat | HOBBS (G/SA) |
| 10. Elevation (Show whether DF, RKB, RT GR, etc.) | 3662' DF |
| | NMPM LEA County |

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 Gas Well Other Temporary Abandoned

2. Name of Operator OCCIDENTAL PERMIAN LTD.

3. Address of Operator 1017 W STANOLIND RD.

4. Well Location
Unit Letter K 2310 Feet From The SOUTH Line and 2310 Feet From The WEST Line
Section 30 Township 18-S 38-E

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"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> | COMMENCE DRILLING OPNS. <input type="checkbox"/> | PLUG & ABANDONMENT <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/> | | CASING TEST AND CEMENT JOB <input type="checkbox"/> | |
| OTHER: _____ <input type="checkbox"/> | | OTHER: <u>MIT</u> <input checked="" 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.

Test Date: 4/26/2001

Pressure Reading: Initial - 560 psi. 15 min - 550, 30 min - 540 psi.

Length of pressure test 30 minutes.

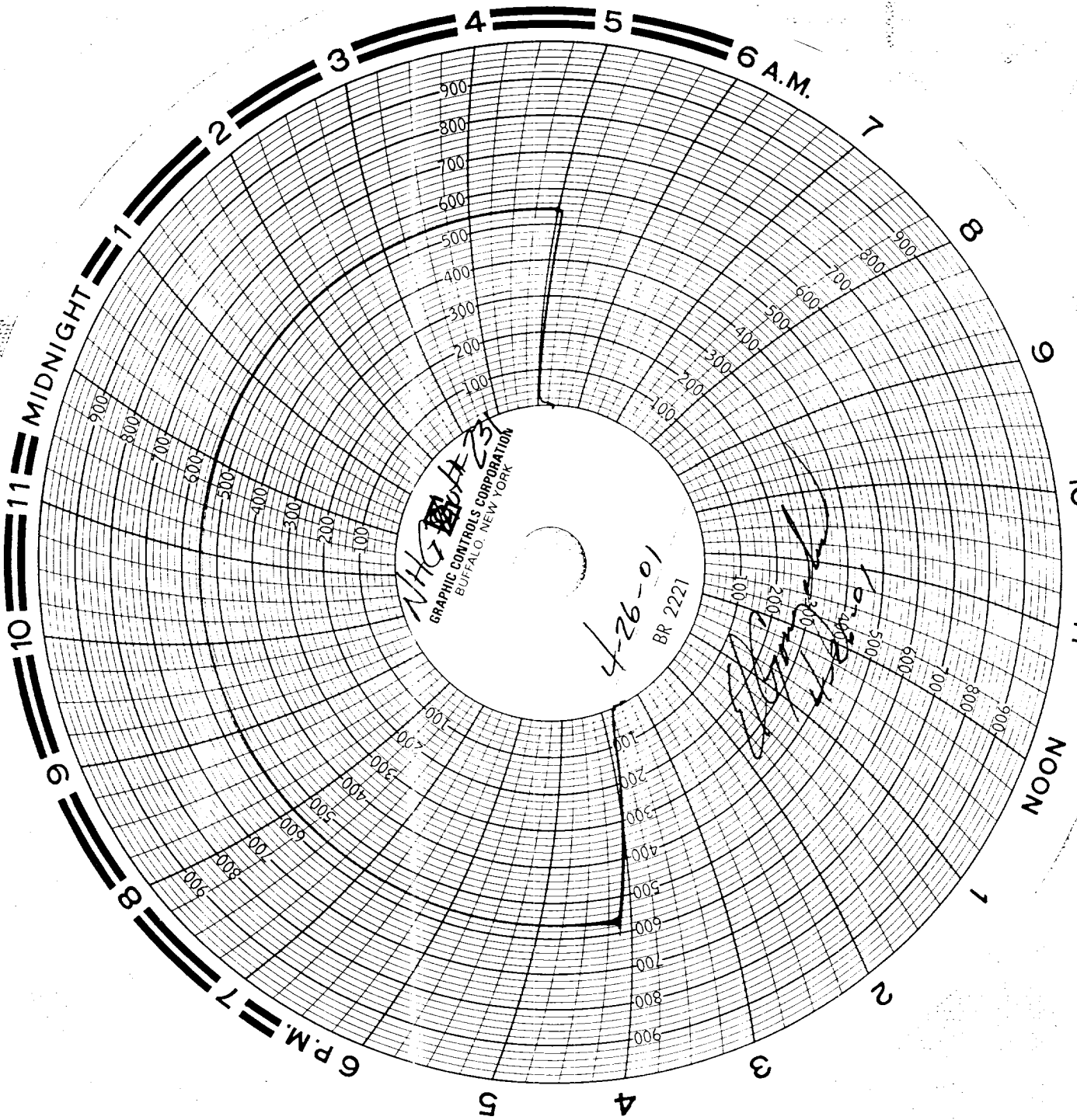
6/5/06

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

SIGNATURE _____ TITLE Engineering Tech. DATE 5/22/01
TYPE OR PRINT NAME Steve W. Jones

(This space for State Use) TELEPHONE NO. 505/397-8228

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL IF ANY: _____



NHG
GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK

4-26-01
BR 2221

W. G. ...
4-26-01

Salt Springs &
Suer &

Cal/drate 4-13-01
Spring 1000 #

North #665
K. 30.18.38
Suet 560 #
Fin " 540 #

5/14/01 # 231

TR/1000