

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. 30-025-28349
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 SOUTH HOBBS (G/SA) UNIT
8. Well No. 146
9. Pool name or Wildcat HOBBS (G/SA)
10. Elevation (Show whether DF, RKB, RT GR, etc.) 3600' GR

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 T.A'd - 4/20/98

2. Name of Operator OCCIDENTAL PERMIAN LTD.

3. Address of Operator 1017 W. STANOLIND RD.

4. Well Location SL/BHL:
Unit Letter D : 75 Feet From The NORTH Line and 1205 Feet From The WEST Line
Section 9 Township 19-S RANGE 38-E NMPM LEA County

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 checked="" 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>REMEDIAL WORK AND 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.

Failed MIT. Key Energy rigged up on it to repair. Maclaskey Services did a pressure test on it and found no leaks.

TEST DATE: 07/30/01

PRESSURE READING: INITIAL 515 PSI; 15 MIN - 515 PSI; 30 MIN - 510 PSI.

LENGTH OF PRESSURE READING: 30 MIN

This Approval of Temporary Abandonment Expires 11/06/06

OCT 2001
RECEIVED
HOBBS
OCD

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

SIGNATURE Steve W Jones TITLE Engineering Tech. DATE 10/31/01
 TYPE OR PRINT NAME Steve W. Jones TELEPHONE NO. 505/397-8228

(This space for State Use)

APPROVED BY _____ TITLE ORIGINAL SIGNED BY DATE NOV 08 2001
GARY W. WINK
 CONDITIONS OF APPROVAL IF ANY: NATURAL SCIENCE MANAGER - 2