

DISTRICT 1

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.  
30-025-29412

5. Indicate Type of Lease

FED ☐ STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

**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 ☐ Temporarily Abandoned

2. Name of Operator OCCIDENTAL PERMIAN LTD.

3. Address of Operator 1017 W. STANOLIND RD.

7. Lease Name or Unit Agreement Name  
SOUTH HOBBS (G/SA) UNIT

8. Well No. 205

9. Pool name or Wildcat  
HOBBS (G/SA)

4. Well Location

Unit Letter N : 330 Feet From The SOUTH Line and 1650 Feet From The WEST Line  
Section 5 Township 19-S RANGE 38-E NMPM LEA County

10. Elevation (Show whether DF, RKB, RT GR, etc.)  
3612' GL

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

**NOTICE OF INTENTION TO:**

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐  
OTHER: ☐

**SUBSEQUENT REPORT OF:**

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG & ABANDONMENT ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER: Casing Integrity Test - TA status ☒

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: 12/12/02

PRESSURE READING: INITIAL - 600 PSI; 15 MIN - 580 PSI; 30 MIN - 560 PSI

LENGTH OF PRESSURE READING: 30 MIN

TEST WITNESSED: NO

This Approval of Temporary  
Abandonment Expires

12/20/07

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 12/19/02  
TYPE OR PRINT NAME STEVE W JONES TELEPHONE NO. 505/397-8228

(This space for State Use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL IF ANY: