

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. 30-025-29062

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.)

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

SECTION 24

1. Type of Well:
Oil Well Gas Well Other Injector

2. Name of Operator
ALTURA ENERGY LTD.
Occidental Permian LP

8. Well No. 342

3. Address of Operator 1017 W STANOLIND RD.

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

4. Well Location
Unit Letter O : 145 Feet From The South Line and 1435 Feet From The EAST Line
Section 24 Township 18-S Range 37-E NMPM LEA County

10. Elevation (Show whether DF, RKB, RTGR, etc.)
3665' 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"/>	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:	<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.

- RUPU. Pull injection equipment.
- Perforate 4115'-30'. 2 JSPF 180 deg spiral phasing.
- Stimulate new perms w/1000 g 15% NEFE HCL acid.
- Run 7" UNI VI pkr. Set pkr @4020'. XL on/off tool w/1.875 ss "F" nipple.
- 130 jts 2-7/8" tbg. Bot of tbg @4020'.
- Tst csg to 580 psi for 30 min and chart for the NMOCD.
- RDP. Clean Location.

Rig Up Date: 04/30/2004
Rig Down Date: 05/05/2004



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

SIGNATURE Robert Gilbert TITLE Workover Compl Specialist DATE 05/09/2004
TYPE OR PRINT NAME Robert Gilbert PHONE NO. 505/397-8206

(This space for State Use)
APPROVED BY Hayward Wink TITLE OC FIELD REPRESENTATIVE II/STAFF MANAGER DATE MAY 14 2004
CONDITIONS OF APPROVAL IF ANY:

