State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 5-27-2004

FILE IN TRIPLICATE	OIL CONSERV	ATION DIVISIO)N		
DISTRICT I 1625 N. French Dr., Hobbs, NM 88240	1220 South St. Francis Dr. Santa Fe, NM 87505		WELL API NO.		
DISTRICT II	Jan.a. 1 0,		5. Indicate Type of Lease		
1301 W. Grand Ave, Artesia, NM 88210			STATE	FEE X	
<u>DISTRICT III</u>			6. State Oil & Gas Lease	No.	
1000 Rio Brazos Rd, Aztec, NM 87410		<u> </u>			
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or Unit A	7. Lease Name or Unit Agreement Name	
(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.)			North Hobbs (G/SA) Section 33	North Hobbs (G/SA) Unit Section 33	
Type of Well: Oil Well X Gas Well Other			8. Well No. 311	8. Well No. 311	
Name of Operator Occidental Permian Ltd.			9. OGRID No. 1579	9. OGRID No. 157984	
3. Address of Operator HCR 1 Box 90 Denver City, TX 79323	3		10. Pool name or Wildca	t Hobbs (G/SA)	
4. Well Location					
Unit Letter B : 330 Fee	et From The North	2310	Feet From The East	Line	
			- NP (PM		
Section 33	Township 18-S Elevation (Show whether DF, R.	Range	38-E NMPM	Lea County	
	45° GL	NB, RI OR, etc.)			
Pit or Below-grade Tank Application	or Closure				
		nearest fresh water well	Distance from near	est surface water	
Pit Type Depth of Ground Water Distance from nearest fresh water well Distance from nearest surface water Pit Liner Thickness mil Below-Grade Tank: Volume bbls; Construction Material					
THE EMERICAN THE DOLO	W-Grade Fank. Volume	0018, 001811401			
12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:					
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING					
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PLUG & ABANDONMENT					
PULL OR ALTER CASING Multiple Completion CASING TEST AND CEMENT JOB					
OTHER: Acid treat well	X	OTHER:			
13. 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.					
1. RUPU. Clean sand off & pull RBPs @1000' & 3789'. 2. Run bit to PBTD.					
2. Run bit to PBTD.					
3. Run in hole with packer set @4000'.					
4. Acid treat well with 15% HCL acid. Flus	h w/fresh water.		(000 sqqou	12/	
5. Run back in hole with ESP equipment. 6. Return well to production.					
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I hereby certify that the information above is true and	complete to the best of my know	ledge and belief. I further	certify that any pit or below-grade	ank has been/will be	
constructed or closed according to NMOCD guidelines	, a general permit	or an (attached) alto	ernative OCD-approved		
SIGNATURE MUNCLEY	Cohnan		trative Associate	DATE 10/31/2006	
TYPE OR PRINT NAME Mendy A. Johnson	E-mail address:	mendy_johnson@ox	ky.com TELEPHONE	ENO. 806-592-6280	
For State Use Only					
APPROVED BY Many W. W.	طمه	TITLE		DATE	
CONDITIONS OF APPROVAL IF ANY:			and the second s		
	and the second second	and the same of the same and the same	II INTAKE MANAGER		