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State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 5-27-2004

FILE IN TRIPLICATE

OIL CONSERVATION DIVISION

DISTRICT I
1625 N. French Dr., Hobbs, NM 88201
DISTRICT II
1301 W Grand Ave, Artesia, NM 88210
DISTRICT III
1000 Rio Brazos Rd, Aztec, NM 87410

SEP 17 2008
HOBBS, NM

1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO 30-025-38023
5. Indicate Type of Lease 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 13
8 Well No. 516
9. OGRID No. 157984
10 Pool name or Wildcat Hobbs (G/SA)

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

2. Name of Operator
Occidental Permian Ltd.

3 Address of Operator
HCR 1 Box 90 Denver City, TX 79323

4 Well Location
Unit Letter M : 480 Feet From The South 1275 Feet From The West Line
Section 13 Township 18-S Range 37-E NMPM Lea County

11. Elevation (Show whether DF, RKB, RT GR, etc.)
3677' GL

Pit or Below-grade Tank Application or Closure
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 _____

12. 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"/>	Multiple Completion <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>			
OTHER: _____ <input type="checkbox"/>		OTHER: <u>OAP/ Acid treat</u> <input checked="" type="checkbox"/>			

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.

- RUPU & RU. POOH w/tubing and pump.
- ND wellhead/NU BOP.
- RIH w/bit. Tag @4268' (CIBP).
- RIH w/packer set @4262'. Test CIBP @4265' to 1000 PSI. Tested OK. Pull packer to 4189'. Test above packer to 500#. Tested OK.
- RU Gray slickline & get dip in pressure @4233'. POOH w/packer.
- RU wireline and RIH w/CIBP set @4218'. RD wireline.
- RIH w/packer set @4200'. Test CIBP. Tested OK. POOH w/packer
- RU wireline & perforate hole @4168-76', 83-94', 4200-02' @2 JSPF. RD wireline.
- RIH w/treating packer set @4126'. RU HES & acid treat w/25 bbl of 15% HCL acid. Flush w/30 bbl of 10# brine. RD HES. Perform scale squeeze. Flush w/200 bbl of fresh water. POOH w/treating packer.

see attached sheet for additional data

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan

SIGNATURE Mendy A. Johnson TITLE Administrative Associate DATE 09/11/08
 TYPE OR PRINT NAME Mendy A. Johnson E-mail address: mendy_johnson@oxy.com TELEPHONE NO. 806-592-6280

For State Use Only
 APPROVED BY [Signature] TITLE PETROLEUM ENGINEER DATE SEP 22 2008
 CONDITIONS OF APPROVAL IF ANY:

NHU 13-516

10. RIH w/production equipment on 130 jts of 2-7/8" tubing. Seat nipple set @4173'
11. ND BOP/NU wellhead.
12. Check pump action - OK.
13. RDPU & RU. Clean location and return well to production.

RUPU 08/15/08

RDPU 08/20/08