

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.
30-025-05542 **05539**

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

1. Type of Well:
Oil Well Gas Well Other **Inject**
Temporarily Abandoned

8. Well No. 411

2. Name of Operator OCCIDENTAL PERMIAN LTD.

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

3. Address of Operator 1017 W. STANOLIND RD.

4. Well Location
Unit Letter A : 330 Feet From The NORTH Line and 330 Feet From The EAST Line
Section 36 Township 18-S RANGE 37-E NMPM LEA County

10. Elevation (Show whether DF, RKB, RT GR, etc.)
3658' DF

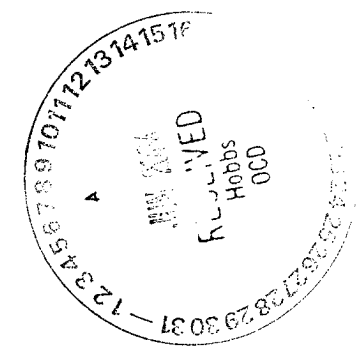
11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

| | | | |
|--|---|---|---|
| NOTICE OF INTENTION TO: | | SUBSEQUENT REPORT OF: | |
| PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input 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>Casing Integrity Test - TA status</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.

TEST DATE: 05/10/04
PRESSURE READING: INITIAL - 560 PSI; 15 MIN - 555 PSI; 30 MIN - 550 PSI
LENGTH OF PRESSURE READING: 30 MIN
TEST WITNESSED: YES

This Approval of Temporary Abandonment Expires 5/10/09

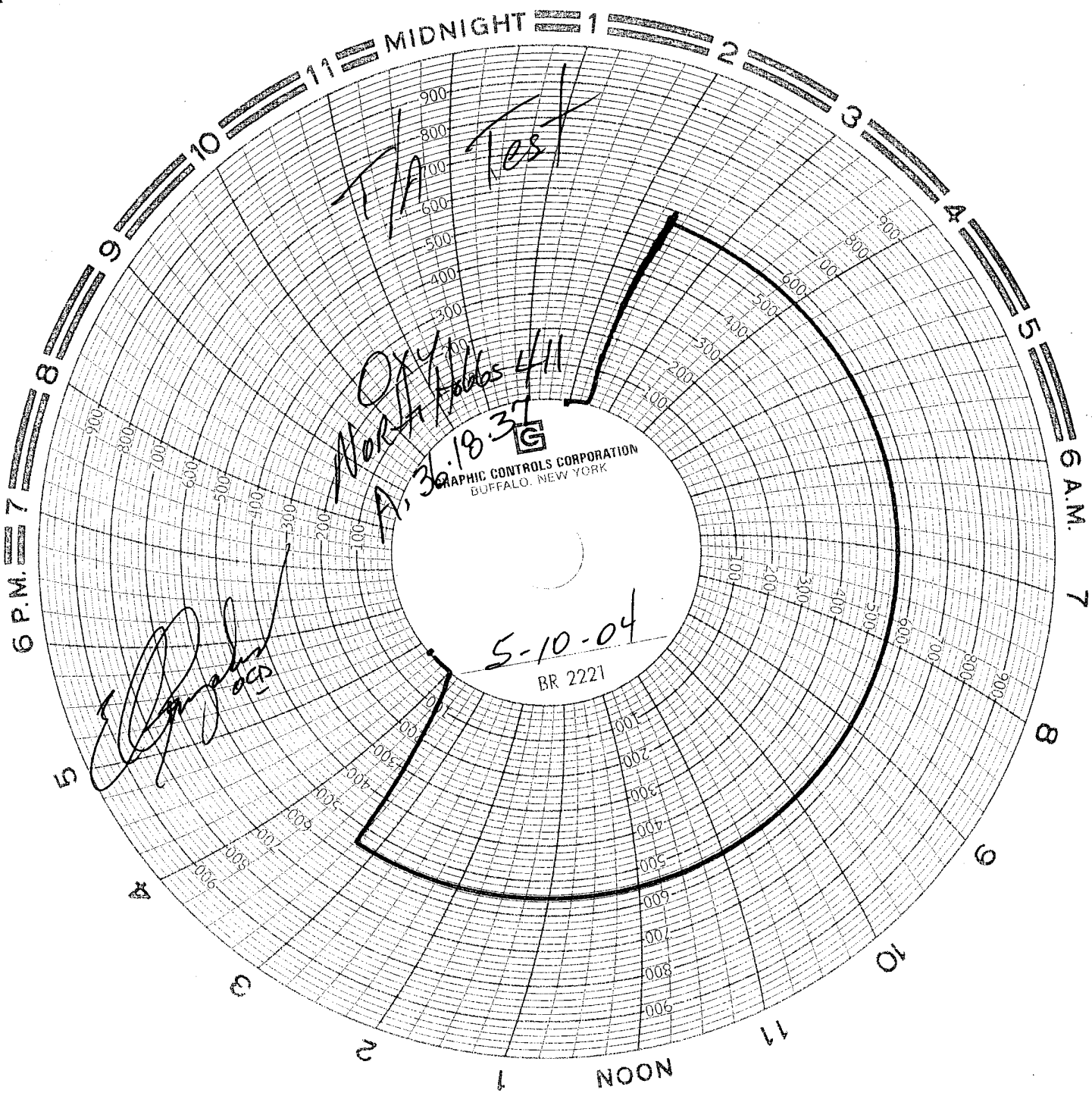


I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Steve W Jones TITLE ENGINEERING TECH DATE 05/28/04
TYPE OR PRINT NAME STEVE W JONES TELEPHONE 505/397-8228
NO.

(This space for State Use)

APPROVED BY Hayward Wink TITLE OC FIELD REPRESENTATIVE II/STAFF MANAGER DATE JUN 09 2004
CONDITIONS OF APPROVAL IF ANY:



T/A Test

North Hills 4/11

A. 36.18.37

GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK

5-10-04

BR 2221

[Handwritten Signature]

NOON