State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 5-27-2004

FILE IN TRIPLICATE OIL CONSERVATION DIVISION				
<u>DISTRICT I</u> 1625 N. French Dr. , Hobbs, NM 88240	1220 South St. Francis Dr. Santa Fe, NM 87505		WELL API NO. 30-025-36247	/
DISTRICT II			5. Indicate Type of Lease	
1301 W. Grand Ave, Artesia, NM 88210			STATE X	FEE
DISTRICT III			6. State Oil & Gas Lease No.	
1000 Rio Brazos Rd, Aztec, NM 87410				
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or Unit Agreen	nent Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A			North Hobbs (G/SA) Unit	
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (Form C-101) for such proposals.)			Section 30	
1. Type of Well: Oil Well X Gas Well Other			8. Well No. 527	1
Name of Operator Occidental Permian Ltd.			9. OGRID No. 157984	
3. Address of Operator			10. Pool name or Wildcat	Hobbs (G/SA)
HCR 1 Box 90 Denver City, T	79323			
4. Well Location Unit Letter N: 627	Feet From The South	1782Fee	et From The West	Line
Section 30	Township 18-S	Range 38-I	F. NMPM	Lea County
30	11. Elevation (Show whether DF, RK			
	3649' 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 X	PLUG AND ABANDON	REMEDIAL WORK	ALTERING	G CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING OP	NS PLUG&A	ABANDONMENT
PULL OR ALTER CASING	Multiple Completion	CASING TEST AND CEMEN	41 JOB	
OTHER:		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. Kill well. Pull out of hole w/ESP equipment.				
2. Set CIBP @4170'. Pressure test well in Zone 1.				
3. Run back in hole w/ESP test package & pump test w/Schlumberger VSD test.				
4. Plug back & stimulate well if pump test warrants.				
5. Return well to production.				
			Es.	
Amended initial C-103 to be filed if plug back & stimulation to be performed.				
I hereby certify that the information above is	true and complete to the best of my know	ledge and helief. I further certify	that any nit or helow grade tank h	nag heen/will he
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				
SIGNATURE DATE 05/01/2007				
110109	physon E-mail address:			
	bhnson E-mail address:	mendy_johnson@oxy.com	I ELEPHONE NO.	806-592-6280
For State Use Only	William			P. 13131
APPROVED BY	William	TITLE	DA1	re 🏋
CONDITIONS OF APPROVAL IF ANY:				