

CONDITIONS OF APPROVAL ANY.

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 5-27-200

Revised 5-27-2004 FILE IN TRIPLIC **OIL CONSERVATION DIVISION** WELL API NO. 1220 South St. Francis Dr. DISTRICT I 30-025-07510 1625 N French Dr Santa Fe, NM 87505 5. Indicate Type of Lease STATE FEE X 1301 W Grand 6. State Oil & Gas Lease No DISTRICT III 1000 Rio Brazos Rd, Aztec, NM 87410 7. Lease Name or Unit Agreement Name SUNDRY NOTICES AND REPORTS ON WELLS (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 31 8 Well No. 141 1 Type of Well: Temporarily Abandoned Gas Well Oil Well 9. OGRID No. 157984 2. Name of Operator Occidental Permian Ltd. 10. Pool name or Wildcat Hobbs (G/SA) 3 Address of Operator HCR 1 Box 90 Denver City, TX 79323 4. Well Location Line and 990 Feet From The West Line Unit Letter M Feet From The South 990 **NMPM** County 18-S 38-E Section 11 Elevation (Show whether DF, RKB, RT GR, etc.) 3650' GR or Closure Pit or Below-grade Tank Application Distance from nearest fresh water well ______ Distance from nearest surface water Pit Type Depth of Ground Water _ bbls; Construction Material Below-Grade Tank: Volume Pit Liner Thickness ____ Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 12. SUBSEQUENT REPORT OF: NOTICE OF INTENTION TO: ALTERING CASING REMEDIAL WORK PERFORM REMEDIAL WORK PLUG AND ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. **PLUG & ABANDONMENT TEMPORARILY ABANDON** CASING TEST AND CEMENT JOB Multiple Completion PULL OR ALTER CASING OTHER: OTHER: Casing Integrity Test/TA Status Request 13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any sproposed work) SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion. Test Date: 10/24/2008 Pressure Reading: Initial – 580 PSI; 15 min – 580 PSI; 30 min – 580 PSI This Approval of Temporary Abandonment Expires Length of pressure test: 30 minutes Witnessed: NO 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 closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan **SIGNATURE** TITLE Administrative Associate DATE 11/04/2008 TYPE OR PRINT NAME TELEPHONE NO Johnson E-mail address: 806-592-6280 Mendy mendy johnson@oxy.com For State Use Only OC DISTRICT SUPERVISOR GENERAL MAN THE APPROVED BY

