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State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 5-27-2004

FILE IN TRIPPLICATE

DISTRICT I NOV 17 2008
1625 N. French Dr., Hobbs, NM 88240

DISTRICT II
1301 W. Grand Ave., Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd, Aztec, NM 87410

OIL CONSERVATION DIVISION

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

WELL API NO 30-025-28352
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 South Hobbs (G/SA) Unit Section 9
8. Well No 149
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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other Temporarily Abandoned	7. Lease Name or Unit Agreement Name South Hobbs (G/SA) Unit Section 9
2. Name of Operator Occidental Permian Ltd.	8. Well No 149
3. Address of Operator 4008 N. Grimes PMB-269, Hobbs, NM 88240	9. OGRID No 157984
4. Well Location Unit Letter A 150 Feet From The North 380 Feet From The East Line Section 9 Township 19-S Range 38-E NMPM Lea County	10. Pool name or Wildcat Hobbs (G/SA)
11. Elevation (Show whether DF, RKB, RT GR, etc.) 3620' KB	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> Pit Type _____ Depth of Ground Water _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____ Pit Liner Thickness _____ ml 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. Return well to Production <input checked="" type="checkbox"/>	OTHER <input 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.
1. Kill well, MIRU PU. NU BOP.
 2. RIH w/ 4-34", drill out sand and CIBP @ 4102. Clean out well to TD @ 4343', circulate clean POOH
 3. RU wireline, RIH 5 1/2" casing @ 4 JSPF, perforate casing at following depths: 4154-73'
 4. RIH w/4-1/2" treating packer on 2-7/8" workstring, set at 4148', Acid treat according to following sechedule: 20 Bbls 15% NEFE HCl acid, 500# gelled rock salt block, 20 Bbls acid, 500# block, 20 Bbls acid, flush w/50 bbls fresh water
 5. POOH w/ work string and treating packer
 6. RIH w/ ESP production equipment
 7. Return well to production.

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 Rebecca L. Harmon TITLE Administrative Associate DATE 11-10-08
TYPE OR PRINT NAME Rebecca L. Harmon E-mail address: rebecca_larmon@oxy.com TELEPHONE NO 575-397-8247

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APPROVED BY [Signature] TITLE OC DISTRICT SUPERVISOR/GENERAL MANAGER DATE NOV 20 2008

CONDITIONS OF APPROVAL IF ANY: