

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 88240

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

DISTRICT II
1301 W Grand Ave, Artesia, NM 88210

SEP 25 2009

DISTRICT III
1000 Rio Brazos Rd, Aztec, NM 87410

HOBBSOCD

WELL API NO. 30/025-24005 ✓
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No
7. Lease Name or Unit Agreement Name Conoco State
8. Well No. 4 ✓
9. OGRID No. 148967 ✓
10. Pool name or Wildcat Hobbs Drinkard ✓

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 <input type="checkbox"/>	2. Name of Operator OXY USA, Inc.
3. Address of Operator HCR 1 Box 90 Denver City, TX 79323	4. Well Location Unit Letter <u>O</u> : <u>688</u> Feet From The <u>South</u> <u>2111</u> Feet From The <u>East</u> Line Section <u>33</u> Township <u>18-S</u> Range <u>38-E</u> NMPM <u>Lea</u> County
11 Elevation (Show whether DF, RKB, RT GR, etc)	
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 _____ 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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER <input checked="" type="checkbox"/> Temporarily Abandon well

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. RUPU & RU. ND wellhead/NU BOP.
2. POOH w/plunger lift equipment.
3. RIH w/ bit. Tag @6597'. Circulate well. POOH w/bit.
4. RIH w/CIBP set @6300'. POOH w/tubing.
5. RIH w/CIBP set @5800'. Dump bail 25 ft of cement on top of CIBP.
6. Test casing to 520 PSI for 30 minutes and chart for the NMOCD. Robert Harrison w/NMOCD on site for test.
7. RDPU & RU.
8. Well is temporarily abandoned.

RUPU 06/16/09
RDPU 06/25/09

This Approval of Temporary
Abandonment Expires 9-25-2014

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 09/22/2009
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 DISTRICT 1 SUPERVISOR DATE SEP 25 2009

CONDITIONS OF APPROVAL IF ANY:

