State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

FILE IN TRIPLICATE	OIL CONSERVATION	ON DIVISION				
DISTRICT I P.O. Box 1980, Hobbs, NM 88240	2040 Pacheco St. Santa Fe, NM 87505		WELL API NO.	30-025-28	958	
DISTRICT II	,		5. Indicate Type of L	ease		
811 S. 1st Street, Artesia, NM 88210			FED X	STATE	FEE	
DISTRICT III			6. State Oil & Gas Le	ease No.		_
1000 Rio Brazos Rd, Aztec, NM 87410						
SUNDRY NOTICES AND REPORTS ON WELLS						
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A			7. Lease Name or Unit Agreement Name			
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"						
(FORM C-101 FOR SUCH PROPOSALS.)			NORTH HOBBS (G/SA) UNIT			
1. Type of Well:]			
Oil Well Gas Well Other Injector			Section 30			
2. Name of Operator			8. Well No. 443			
Occidental Permian Ltd.						_
3. Address of Operator			9. Pool name or Wildcat HOBBS (G/SA)			
1017 W. Stanolind Rd., HOBB	S, NM 88240 505/397-820	0	1			
4. Well Location						
Unit Letter P : 1300	Feet From The SOUTH Line a	and 106 Fee	et From The <u>EA</u>	ST L	ine	
Section 30	Township 18S	Range 38E	NMPM		LEA County	
	10. Elevation (Show whether DF, RKB, RT 3648 GL	GR, etc.)				
11. Ch	eck Appropriate Box to Indicate Nature of	of Notice, Report, or (Other Data			Τ
NOTICE OF IN	NTENTION TO:	SUBS	SEQUENT REPO	ORT OF:		
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK			☐ AI	LTERING CA	ASING -	_
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OP					<u> </u>	=
				LUG & ABAI	ADONMENT	
PULL OR ALTER CASING] CAS	SING TEST AND CEMEN	NT JOB			
OTHER: OTHER: Return well to			o Injection		X	
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						
SEE RULE 1103. 1. RUPU.						
2. Set 1.875 wireline plug.						
3. Load and tst csg to 1000 psi.			0303	31		
4. Pull and lay down 2-7/8" J55			1899 J.	157	_	
5. RIH w/127 jts 2-7/8" Duoline			- 19°	2	2	
	Tst csg to 580 psi for 30 min and chart for the	ie NMOCD.	1 0	0.0-	80 /	
7. Pull 1.875 plug. Pkr set @3968. RDPU. Clean Location.	4'. Bottom of tbg @3964'.			. 200	(2)	
8. RDFO. Clean Location.				3,35	ဖြ	
Well returned to injection 04/13/20	004		of.	, } ₆	97077	
··· ··· ··· ··· ··· ··· ··· ··· ··· ··	,,,,		No. of the	3		
Rig Up Date: 04/09/2004				y. Yeng	5/	
Rig Down Date: 04/12/2004				y . 147	/	
Therefore and Good about the information of any	e is true and complete to the best of my knowledge a					_
I hereby certify that the information above	s is true and complete to the best of my knowledge a	ing benet.				
SIGNATURE	ut Fillet IT	TLE Workover Co	omp Specialist	_ DATE	04/20/2004	
TYPE OR PRINT NAME Robert	Gilbert	Marin Land	TELEPH	ONE NO.	505/397-8206	
(This space for State Use)						
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	- \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	LO REPRESENTATI	VE IL/STAFF MAN	IAGER		
APPROVED BY	U. WINK OC FIE	LD REPRESENTATION	7 - 11/	_ DATE		_
CONDITIONS OF APPROVAL IF ANY:						

