

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO.
30-025-05506

Indicate Type of Lease

STATE ☒

FEE

State Oil & Gas Lease No.

Lease Name or Unit Agreement Name
North Hobbs G S/A Unit

Well No.
311

Pool name or Wildcat
Hobbs; Grayburg / San Andres

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.)

Type of Well:

OIL
WELL ☒

GAS
WELL ☐

OTHER

Name of Operator
Occidental Permian, LTD

Address of Operator
PO Box 4294 Houston, Texas 77210-4294

Well Location

Unit Letter **B** : **330** Feet From The **North** Line and **1980** Feet From The **East** Line

Section **25** Township **18-S** Range **37-E** NMPM Lea County

Elevation (Show whether DF, RKB, RT, GR, etc.)

3672'

11

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ANBANDONMENT ☒

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

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.

5-12-04 Tagged existing CIBP @ 3850'
Circ. well w/ plugging mud.
Spot 20 sks of cement 3850'-3724'
5-13-04 Perf @ 2795' Sqz'd 45 sks of cement WOC & tagged TOC @ 2680'
Perf @ 1590'
5-14-04 Sqz'd 70 sks of cement WOC & tagged TOC @ 1479'
Perf @ 270' Established circulation out both annulus, circulated 160 sks of cement Tagged TOC @ 15'
5-17-04 Filled well w/ 10 sks of cement 15'-surface.

Approved as to plugging of the Well Bore.
Liability under bond is retained until
surface restoration is completed

Cut off wellhead & anchors 3' BGL. Cap well. Install dry hole marker.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE

TITLE

DATE

TYPE OR PRINT NAME

TELEPHONE NO.

(This space for State Use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

OC FIELD REPRESENTATIVE II/STAFF MANAGER JUN 09 2004