

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 5-27-2004

FILE IN TRIPLICATE

OIL CONSERVATION DIVISION

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

DISTRICT I

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

WELL API NO.	30-025-07493
5. Indicate Type of Lease	STATE ☐ FEE ☒
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name	NORTH HOBBS (G/SA) UNIT
8. Well No.	421
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 ☒ Gas Well ☐ Other ☐	
2. Name of Operator Occidental Permian Ltd.	
3. Address of Operator 1017 W. Stanolind Rd., HOBBS, NM 88240 505/397-8200	
4. Well Location Unit Letter <u>H</u> : <u>1370</u> Feet From The <u>NORTH</u> <u>330</u> Feet From The <u>EAST</u> Line Section <u>31</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.) 3642 GL	
Pit or Below-grade Tank Application ☐ or Closure ☐ 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 ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG & ABANDONMENT ☐
PULL OR ALTER CASING ☐	Multiple Completion ☐	CASING TEST AND CEMENT JOB ☐	
OTHER: <u>DO CIBP and stimulate</u>	☒	OTHER: _____	☐

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. Pull equipment.
2. DO CIBP at 4070 and 4080.
3. Acid stimulate 4174-4260.
4. Run production equipment.

RECEIVED
HOBBS
OCD

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 NMOC guidelines ☐ , a general permit ☐ or an (attached) alternative OCD-approved plan ☐			
SIGNATURE <u>[Signature]</u>	TITLE <u>Engineering Advisor</u>	DATE <u>2-25-05</u>	
TYPE OR PRINT NAME <u>David Nelson</u>	E-mail address: _____	TELEPHONE NO. <u>505-397-8200</u>	

For State Use Only	
APPROVED BY <u>[Signature]</u>	OC FIELD REPRESENTATIVE II/STAFF MANAGER
CONDITIONS OF APPROVAL IF ANY: _____	DATE <u>MAR 02 2005</u>