State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 5-27-2004

FILE IN TRIPLICATE	FILE IN TRIPLICATE OIL CONSERVATION DIVISION				
DISTRICT I 1625 N. French Dr. , Hobbs, NM 88240	1220 South St. Francis Dr. Santa Fe, NM 87505		WELL API NO. 30-025-36216		
DISTRICT II			5. Indicate Type of Lease		
1301 W. Grand Ave, Artesia, NM 88210			STATE	FEE X	
DISTRICT III			6. State Oil & Gas Lease No.	·	
1000 Rio Brazos Rd, Aztec, NM 87410	DESCRIPTION OF THE PROPERTY OF		7 1 N 11 4	NI	
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or Unit Agreement Name		
(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.)			NORTH HOBBS (G/SA) UNIT		
Type of Well: 1. Type of Well:			8. Well No. 525		
Oil Well X Gas Well Other					
2. Name of Operator			9. OGRID No. 157984		
Occidental Permian Ltd. 3. Address of Operator			10. Pool name or Wildcat	HOBBS (G/SA)	
1017 W. Stanolind Rd., HOBBS, NM 8	88240 505/397-82	00	10/1 00/1mmile 0/ Wildow	HODDS (G/SA)	
4. Well Location					
Unit Letter K : 1947	Feet From The SOUTH	Fee	t From The WEST	Line	
Section 30	Township 18-S	Range 38-F	NMPM	LEA County	
	11. Elevation (Show whether DF, RKB, I 3652 GL	RT GR, etc.)			
			XIIIIIIIIIIII		
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 C	CHANGE PLANS	COMMENCE DRILLING OPNS	S PLUG & A	BANDONMENT	
	fultiple Completion	CASING TEST AND CEMENT			
			300		
OTHER: Shut off upper San Andres and		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 Dull agginment					
 Pull equipment. Squeeze 4156-63 					
3. Perforate 4170-73, 4228-32					
4. Acid stimulate and run production equipm	ment.			£ "	
				1 m	
				0, 6, 4x	
				82.0	
I hereby certify that the information above is true and		_		e constructed or	
closed according to NMOCD gylidelines	, a general permit	or an (attached) alternative	OCD-approved plan		
SIGNATURE	<u> </u>	TITLE Engineering Adv	risor DAT	E 3.51-02	
TYPE OR PRINT NAME David Nelson	E-mail address:		TELEPHONE NO.	A4 A505-397-8200	
For State Use Only	11911			MAR 0 ≈ 2005	
APPROVED BY Law W.	wink	TITLE	a ti tota me ti ania ceda	TE	
CONDITIONS OF APPROVAL IF ANY.	00	FIELD REPRESENTATIV	E II/3IMIT WORKS		