

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-140
Revised June 10, 2003

District I (505) 393-6161
1625 N. French Dr., Hobbs, NM 88240
District II (505) 748-1283
1301 W Grand Avenue, Artesia, NM 88210
District III (505) 334-6178
1000 Rio Brazos Rd, Aztec, NM 87410
District IV (505) 827-8198
1220 So. St. Francis Dr., Santa Fe, NM 87505

Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505
(505) 476-3440

SUBMIT ORIGINAL
PLUS 2 COPIES
TO APPROPRIATE
DISTRICT OFFICE

H-05-00001

APPLICATION FOR
WELL WORKOVER PROJECT

I. Operator and Well

Operator name & address Occidental Permian Limited Partnership P.O. Box 4294 Houston, TX 77210-4294						OGRID Number 157984		
Contact Party Karen Ellis Room 19.015						Phone 713-366-5161		
Property Name North Hobbs (G/SA) Unit				Well Number 32-322		API Number 30-025-07518		
UL G	Section 32	Township 18-S	Range 38-E	Feet from the 2310	North/South Line North	Feet from the 2310	East/West Line East	County Lea

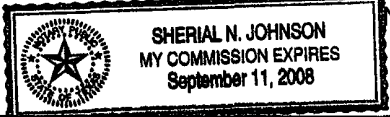
II. Workover

Date Workover Commenced: 6/17/2004	Previous Producing Pools(s) (Prior to Workover) Hobbs (G/SA)
Date Workover Completed: 6/23/2004	

III. Attach a description of the Workover Procedures performed to increase production.

IV. Attach a production decline curve or table showing at least twelve months of production prior to the workover and at least three months of production following the workover reflecting a positive production increase.

V. AFFIDAVIT:

State of <u>Texas</u>	} ss.
County of <u>Harris</u>	
Karen Ellis, being first duly sworn, upon oath states:	
1. I am the Operator or authorized representative of the Operator of the above referenced Well.	
2. I have made, or caused to be made, a diligent search of the production records reasonably available for this Well.	
3. To the best of my knowledge, this application and the data used to prepare the production curve and/or table for this Well are complete and accurate.	
Signature <u>Karen Ellis</u> Title <u>Tax Incentive Analyst</u> Date <u>01/03/2005</u>	
E-mail Address <u>karen.ellis@oxy.com</u>	
SUBSCRIBED AND SWORN TO before me this <u>3rd</u> day of <u>January</u> , 20 <u>05</u> .	
My Commission expires:	Notary Public <u>Sherial N. Johnson</u>
	

FOR OIL CONSERVATION DIVISION USE ONLY:

VI. CERTIFICATION OF APPROVAL:

This application is hereby approved and the above-referenced well is designated a Well Workover Project and the Division hereby verifies the data shows a positive production increase. By copy hereof, the Division notifies the Secretary of the Taxation and Revenue Department of this Approval and certifies that this Well Workover Project was completed on

6/23/2004

Signature District Supervisor <u>[Signature]</u>	OCD District <u>1</u>	Date <u>1/07/05</u>
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VII. DATE OF NOTIFICATION TO THE SECRETARY OF THE TAXATION AND REVENUE DEPARTMENT:

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

FILE IN TRIPLICATE

OIL CONSERVATION DIVISION

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

2040 Pacheco St.
Santa Fe, NM 87505

DISTRICT II

811 S. 1st Street, Artesia, NM 88210

DISTRICT III

1000 Rio Brazos Rd, Aztec, NM 87410

WELL API NO.
30-025-07518

5. Indicate Type of Lease
FED ☐ STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

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.)

7. Lease Name or Unit Agreement Name
NORTH HOBBS (G/SA) UNIT

1. Type of Well:
Oil Well ☒ Gas Well ☐ Other ☐

Section 32

2. Name of Operator
Occidental Permian LTD.

8. Well No. 322

3. Address of Operator
1017 W. Stanolind Rd., HOBBS, NM 88240 505/397-8200

9. Pool name or Wildcat HOBBS (G/SA)

4. Well Location
Unit Letter G : 2310 Feet From The NORTH Line and 2310 Feet From The EAST Line
Section 32 Township 18S Range 38E NMPM LEA County

10. Elevation (Show whether DF, RKB, RT GR, etc.)
3637' GL

11. 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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG & ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <u>Convert well to ESP. Open Additional Pay</u> <input checked="" type="checkbox"/>	

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.

1. RUPU. Pull and lay down rods and pump.
2. Perfoate the following intervals 4067-73 and 4077-80, using 2 JSPF and 180 deg ph. (22 holes).
3. Pump 500 g Xylene. Asphaltines in prod tbg.
4. Stimulate perms 4070 - 4195 w/2000 g 15% NEFE HCL acid.
5. RIH w/Reda ESP equipment on 129 jts 2-7/8" tbg. Intake set @4040'.
6. Rig down pulling unit. Clean Location.

Rig Up Date: 06/17/2004

Rig Down Date: 06/23/2004

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

SIGNATURE _____ TITLE Workover Compl Specialist DATE 06/26/2004

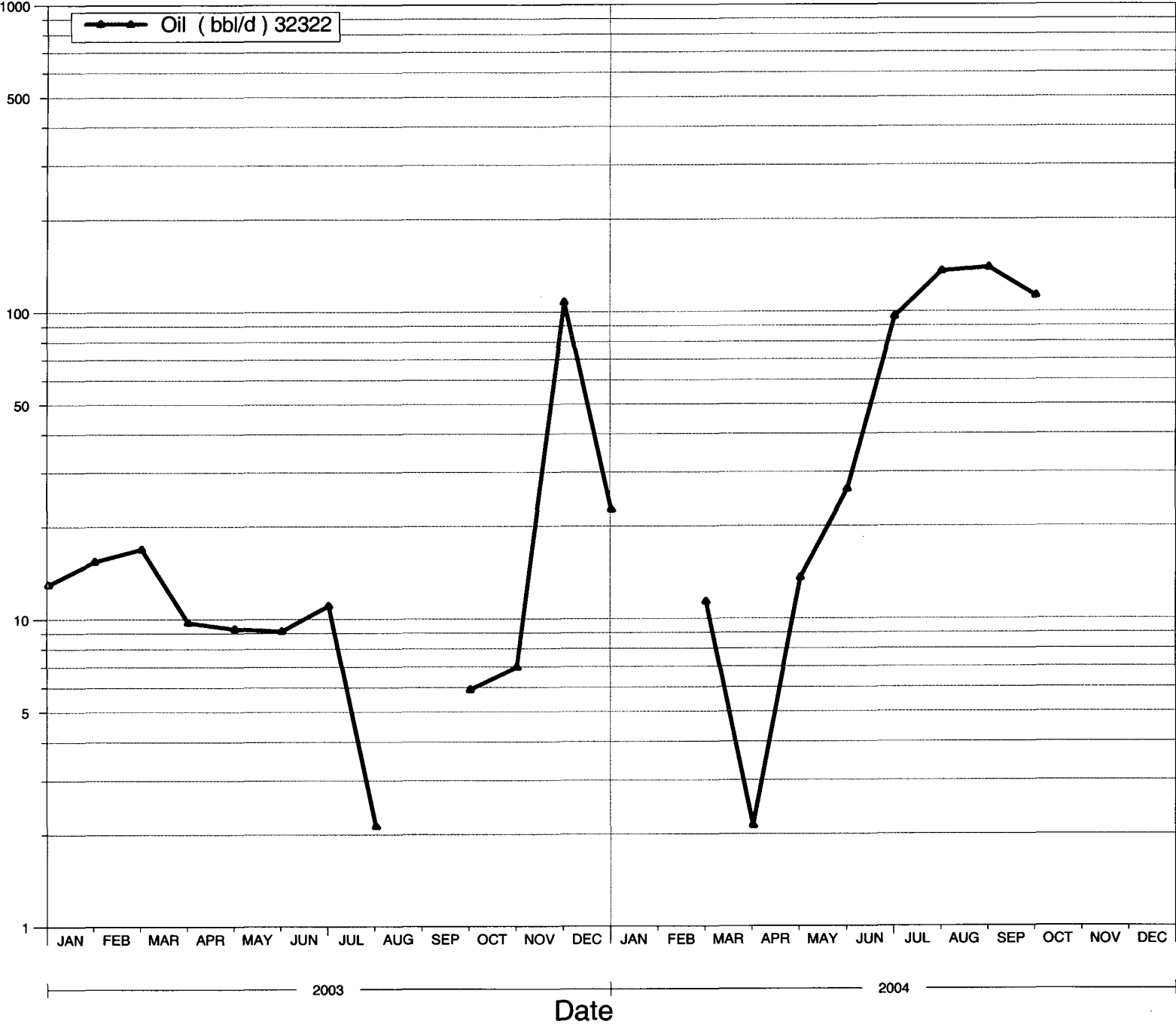
TYPE OR PRINT NAME Robert Gilbert TELEPHONE NO. 505/397-8206

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL IF ANY:

North Hobbs Unit 32-322



NORTH HOBBS UNIT WELL NO. 32322

DATE	Oil Rate (Cal. Day)	Monthly Oil bbl
20030101	13	401
20030201	15	431
20030301	17	523
20030401	10	292
20030501	9	288
20030601	9	274
20030701	11	342
20030801	2	66
20030901	0	12
20031001	6	183
20031101	7	209
20031201	108	3342
20040101	23	703
20040201	0	0
20040301	11	352
20040401	2	64
20040501	14	421
20040601	26	792
20040701	96	2988
20040801	135	4197
20040901	139	4175
20041001	113	3489