

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

DISTRICT I

1625 N. French Drive, Hobbs, NM 88240

OIL CONSERVATION DIVISION

310 Old Santa Fe Trail, Room 206  
Santa Fe, New Mexico 87503

WELL API NO.	30-025-36245
5. Indicate Type of Lease	FED <input type="checkbox"/> STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name	NORTH HOBBS (G/SA) UNIT
SECTION	32
8. Well No.	514
9. Pool name or Wildcat	HOBBS (G/SA)
4. Well Location	Unit Letter <u>E</u> : <u>2279</u> Feet From The <u>NORTH</u> Line and <u>229</u> Feet From The <u>WEST</u> Line Section <u>32</u> Township <u>18-S</u> Range <u>38-E</u> NMPM LEA County
10. Elevation (Show whether DF, RKB, RT GR, etc.)	3635' GL

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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>
2. Name of Operator	OCCIDENTAL PERMIAN LIMITED PARTNERSHIP
3. Address of Operator	1017 W STANOLIND RD.
4. Well Location	Unit Letter <u>E</u> : <u>2279</u> Feet From The <u>NORTH</u> Line and <u>229</u> Feet From The <u>WEST</u> Line Section <u>32</u> Township <u>18-S</u> Range <u>38-E</u> NMPM LEA County
10. Elevation (Show whether DF, RKB, RT GR, etc.)	3635' 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>NEW WELL COMPLETION</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.

Rig up Pulling Unit.  
Perforate the San Andres Zone 4186'- 4320'.  
Stimulate San Andres perms w/2000 gal 15% HCL acid.  
RIH w/ REDA ESP on 126 jts 2-7/8" tbq.  
Intake set @4096'.  
Rig Down and Clean Location.

Rig Up Date: 05/27/2003  
Rig Down Date: 05/30/2003



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

SIGNATURE Robert Gilbert TITLE SR. ENGR. TECH DATE 06/04/2003  
TYPE OR PRINT NAME Robert Gilbert PHONE NO. 505/397-8206

(This space for State Use)  
APPROVED BY Gary W. Wink TITLE OC FIELD REPRESENTATIVE II/STAFF MANAGER DATE JUN 17 2003  
CONDITIONS OF APPROVAL IF ANY: