Form C-103 Revised 1-1-89

State of New Mexico Energy, Minerals and Natural Resources Department

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DISTRICT I

OIL CONSERVATION DIVISION

1625 N. FRENCH DRIVE, HOBBS, NM 88240	310 Old Santa Fe Trail, Room 206	WELL API NO.
Santa Fe, New Mexico 87503		30-025-05475
		5. Indicate Type of Lease FED STATE X FEE
		FED STATE X 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:	7	-
	Well Other Temperarily Abandoned	
2. Name of Operator OCCIDENTAL PER	RMIAN LTD.	8. Well No. 341
3. Address of Operator 1017 W. STANOLI	ND RD.	9. Pool name or Wildcat HOBBS (G/SA)
4. Well Location		
Unit Letter () : 990 Feet F	The COLUMN L' 1 1650 F	
Unit Letter O : 990 Feet F	rom The SOUTH Line and 1650 Fe	eet From The EAST Line
Section 23	Township 18-S RANGE 37-	E NMPM LEA County
10. Eli	evation (Show whether DF, RKB, RT GR, etc.) GL	
Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
	ND ABANDON REMEDIAL WORK	ALTERING CASING
	E PLANS COMMENCE DRILLING O	PNS. PLUG & ABANDONMENT
PULL OR ALTER CASING	CASING TEST AND CEME	ENT JOB
OTHER:		ty Test – TA status
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.		
TEST DATE: 05/11/05		
PRESSURE READING: INITIAL - 580 PSI; 15 MIN - 580 PSI; 30 MIN - 580 PSI		
LENGTH OF PRESSURE READING: 30 MIN		
TEST WITNESSED: YES		15.05.99
This Approval of Temporary 5/1/10 Abandonment Expires		
	Abandonment Expires	and the second s
I hereby certify that the information above is true and con	mplete to the best of my knowledge and belief.	
SIGNATURE Stone (1)	·	ICA TERCOVA
TYPE OR PRINT NAME STEVE W JOVES	TITLE ENGINEERIN	
(This space for State Use).		
APPROVED BY HOLD REPRESENTATIVE II/STAFF MANAGER MAY 3 0 2005		
CONDITIONS OF APPROVAL FANY:		

