State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 5-27-2004

FILE IN TRIPLICATE	OIL CONSERVA	ATION DIVISION		
DISTRICT I 1625 N. French Dr. , Hobbs, NM 88240	1220 South St. Francis Dr. Santa Fe, NM 87505		WELL API NO. 30-025-07444	
DISTRICT II			5. Indicate Type of Lease	
1301 W. Grand Ave, Artesia, NM 88210			STATE X	FEE
DISTRICT III			6. State Oil & Gas Lease No.	
1000 Rio Brazos Rd, Aztec, NM 87410				
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		
1. Type of Well:			Section 29 8. Well No. 441	
Oil Well X Gas Well Other		441		
2. Name of Operator			9. OGRID No. 157984	
Occidental Permian Ltd.				
3. Address of Operator	ND4 00240 505/20	7 0000	10. Pool name or Wildcat	HOBBS (G/SA)
1017 W. Stanolind Rd., HOBBS, 4. Well Location	NM 88240 505/39	7-8200		
Unit Letter P : 330	Feet From The SOUTH	330 Fe	et From The EAST	Line
Section 29	Township 18-S	Range 38-	E NMPM	LEA County
	11. Elevation (Show whether DF, RK	B, RT GR, etc.)		
	36474' GR			
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	X ALTERING	CASING
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPN			NS. PLUG & ABANDONMENT	
PULL OR ALTER CASING	Multiple Completion	CASING TEST AND CEME	NT JOB	
OTHER:		OTHER:	<u> </u>	
12 Describe Proposal or Completed On			- 1- 1- 1'	
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. RUPU. Pull ESP equipment.				
2. Clean out to PBTD @4255'.				
3. Perforate the following intervals; 4050-56, 4112-14, 4125-30, and 4137-40 using 2 spf, 180 deg sp ph. (36 holes).				
 Stimulate perfs 4056 to 4149 and open hole 4172-4255' w/3800 g 15% NEFE HCL acid. RIH w/Reda ESP equipment on 121 jts 2-3/8" tbg. Intake set @3920'. 				
6. Install QCI wellhead connection. NU wellhead.				
7. RDPU. Clean Location.				
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8. Rig Up Date: 08/18/2005	No weinicad.		La	1 20 Miles
8.	No weinicad.		Power	7111 2.00 C. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
8. Rig Up Date: 08/18/2005 Rig Down Date: 08/24/2005 I hereby certify that the information above is		ledge and belief. I further certify	that any pit or below-grade tank h	z v tet da s been/will be
8. Rig Up Date: 08/18/2005 Rig Down Date: 08/24/2005 I hereby certify that the information above is constructed or	true and complete to the best of my know	_		z v C. le la
8. Rig Up Date: 08/18/2005 Rig Down Date: 08/24/2005 I hereby certify that the information above is	true and complete to the best of my know	or an (attached) alternation		z v z z z z z z z z z z z z z z z z z z
8. Rig Up Date: 08/18/2005 Rig Down Date: 08/24/2005 Thereby certify that the information above is constructed or closed according to NMOCD guidelines	true and complete to the best of my know	or an (attached) alternative plan	ve OCD-approved	
8. Rig Up Date: 08/18/2005 Rig Down Date: 08/24/2005 I hereby certify that the information above is constructed or closed according to NMOCD guidelines SIGNATURE	true and complete to the best of my know	or an (attached) alternati- plan TIŢLE Workover Cor	ve OCD-approved npletion Specialist DATI	3 <u>08/25/2005</u>
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Rig Up Date: 08/18/2005 Rig Down Date: 08/24/2005 I hereby certify that the information above is constructed or closed according to NMOCD guidelines SIGNATURE TYPE OR PRINT NAME Robert Gilb For State Use Only	true and complete to the best of my know	or an (attached) alternation plan TIŢLE Workover Controbert_gilbert@oxy.com	npletion Specialist DATI TELEPHONE NO.	3 08/25/2005 505/397-8206
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