

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.	30-025-27060
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
8. Well No.	312
9. Pool name or Wildcat	HOBBS (G/SA)

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 type="checkbox"/> Gas Well <input type="checkbox"/> Other INJECTOR
2. Name of Operator	OXY PERMIAN LTD
3. Address of Operator	1017 W. Stanolind Rd., HOBBS, NM 88240 505/397-8200
4. Well Location	Unit Letter <u>B</u> : <u>1262</u> Feet From The <u>NORTH</u> Line and <u>1520</u> Feet From The <u>EAST</u> Line Section <u>31</u> Township <u>18S</u> Range <u>38E</u> NMPM LEA County
10. Elevation (Show whether DF, RKB, RT GR, etc.) 3640 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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG & ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <u>Add perms to Upper San Andres</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. Test Tbg. Held OK. Pull injection equipment.
2. Test csg to 1000 psi. Held OK.
3. RIH w/5.5" Guiberson UNI VI pkr and set @4033'.
4. 128 jts 2-7/8" Duoline tbg. Bottom of tbg @4033'.
5. Circ csg w/pkr fluid. Test csg to 700 psi for 30 min and chart for the NMOCD.

Well returned to injection 05/20/2003

Rig up Date: 05/15/2003

Rig Down Date: 05/19/2003

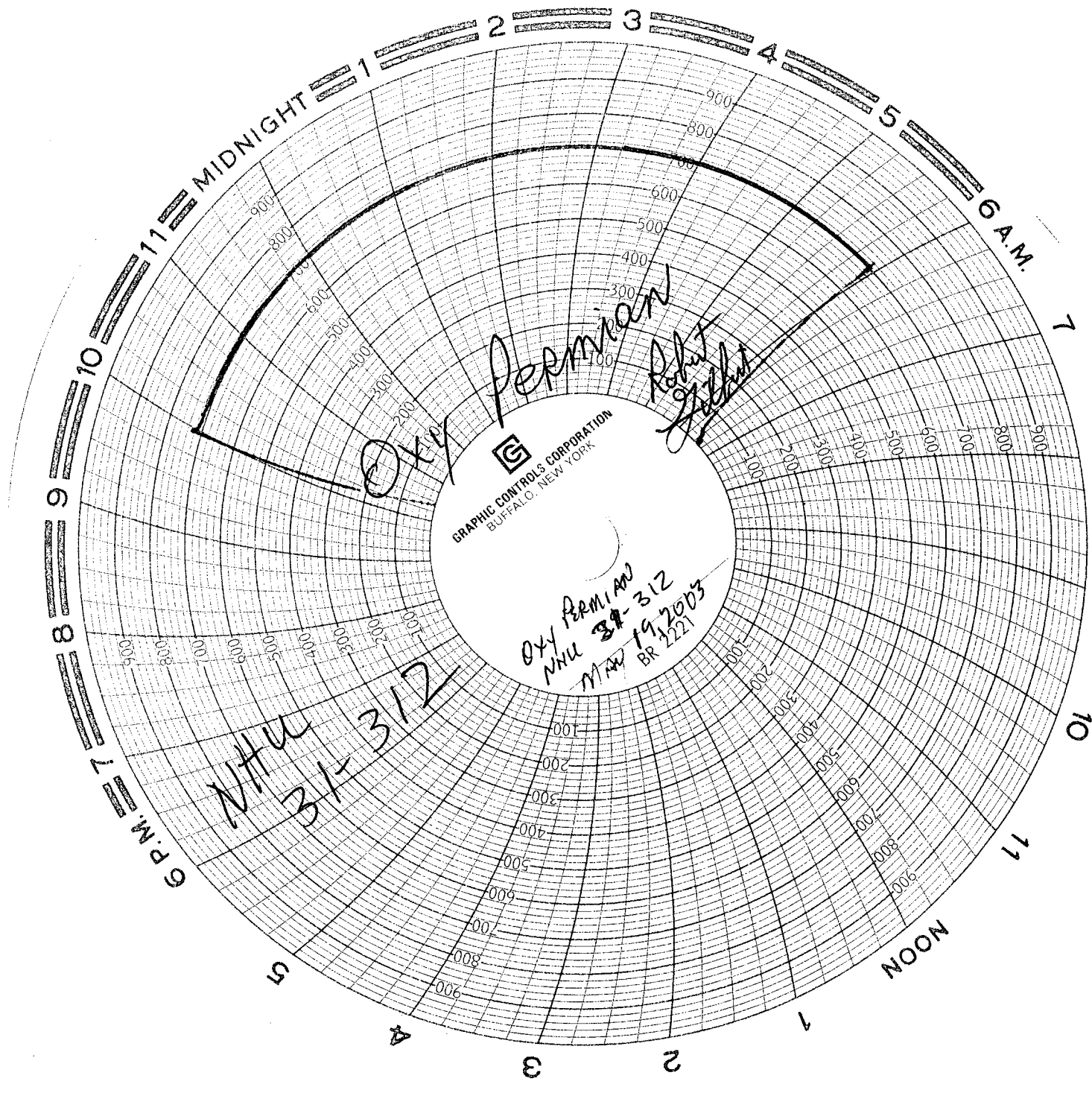


I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Robert Gilbert TITLE SR. ENGR TECH DATE 05/20/2003
TYPE OR PRINT NAME ROBERT GILBERT TELEPHONE NO. 505/397-8200

(This space for State Use)

APPROVED BY Harry W. Wink **FIELD REPRESENTATIVE II / STAFF MANAGER** DATE MAY 22 2003
CONDITIONS OF APPROVAL IF ANY:



GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK

Oxy Permian
NHU 31-312
MAR 19 2003
BR 1221