CONDITIONS OF APPROVAL, IF ANY

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

OIL CONSERVATION DIVISION P.O. Box 1980, Hobbs, NM 88240 WELL API NO. 2040 Pacheco St. 30-025-07694 Santa Fe. NM 87505 DISTRICT II P.O. Drawer DD, Artesia, NM 88210 sIndicate Type of Lease FEE X STATE DISTRICT III State Oil & Gas Lease No. 1000 Rio Brazos Rd., Aztec, NM 87410 SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" South Hobbs (G/SA) Unit (FORM C-101) FOR SUCH PROPOSALS.) 1Type of Well: GAS WELL WELL OTHER Injector TA'D 2Name of Operator BWell No. Occidental Permian LTD 100 3Address of Operator Pool name or Wildcat 1017 W. Stanolind Rd. Hobbs, New Mexico Hobbs (G/SA) 4Well Location 330 North 2310 Unit Letter Feet From The Line and West Feet From The Line 15 Section 19 S Township 38 E Range **NMPM** Lea Count 10Elevation (Show whether DF, RKB, RT, GR, etc.) 11 Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PLUG AND ABANDON PERFORM REMEDIAL WORK REMEDIAL WORK ALTERING CASING TEMPORARILY ABANDON **CHANGE PLANS** COMMENCE DRILLING OPNS. PLUG AND ANBANDONMENT **PULL OR ALTER CASING** CASING TEST AND CEMENT JOB OTHER: OTHER: 12Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103. Tag existing CIBP @ 3760' Circ. well w/ M.L.F. Spot 20 sks of cement @ 3930'-3830' — Z 5 5X Perf @ 2680' Sqz. 50 sks of cement 2680'-2580' WOC & Tag Perf @ 1683' Sqz. 50 sks of cement 1683'-1583' WOC & Tag Perf @ 167' Circ.175 sks of cement 167'-surface Cut off wellhead and anchors 3'BGL. Cap well. Install dry hloe marker. THE COMMISSION MUST BE NOTIFIED 24 HOURS PRIOR TO THE BEGINNING OF PLUGGING OPERATIONS FOR THE C-103 TO BE APPROVED. I hereby certify that the info mation above is true and complete to the best of my knowledge and belief. SIGNATURE TYPE OR PRINT NAME Jack Shelton TELEPHONE NO. 915-523-5155 (This space for State Use) yw.wink

FIELD REPRESENTATIVE IL/STAFF MANAGER JUN 1 7 2003



Amoco Production Compa. /

ENGINEERING CHART

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