State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

FILE IN TRIPLICATE	OIL CONSERVATION DIVISION 2040 Pacheco St. Santa Fe, NM 87505		Revised 1-1-89	
<u>DISTRICT I</u>			WELL API NO.	
P.O. Box 1980, Hobbs, NM 88240				5-29017
DISTRICT II	34444	, 1111 01000	5. Indicate Type of Lease	
811 S. 1st Street, Artesia, NM 88210			FED STATE	FEE X
DISTRICT III			6. State Oil & Gas Lease No.	155 A
1000 Rio Brazos Rd, Aztec, NM 87410				
SUNDRY NO	TICES AND REPORTS ON WI	ELLS		
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A		7. Lease Name or Unit Agreement Name		
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"				
	ORM C-101 FOR SUCH PROPOSALS.)		NORTH HOBBS (G/SA) U	NIT
1. Type of Well: Oil Well X	Gas Well Other		ĺ	
2. Name of Operator	Gas Well Other		8. Well No. 312	
Occidental Permian Ltd.			8. Well No. 312	
3. Address of Operator			9. Pool name or Wildcat	HOBBS (G/SA)
1017 W. Stanolind Rd., HOBBS, 1	NM 88240 505/39	97-8200		HOBBO (O/B/I)
4. Well Location				
Unit Letter B : 210	Feet From The NORTH	Line and 1400 Fee	t From The EAST	Line
			- D7 10 1	
Section 32	Township 18S	Range 38E	NMPM	LEA County
	10. Elevation (Show whether DF, R.	KB, RT GR, etc.)		
11. Check				
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	ALTERING	
TEMPORARILY ABANDON	CHANGE PLANS		=	
PULL OR ALTER CASING	OTIVITOE I EARLO	COMMENCE DRILLING OPN		ANDONMENT
	<u></u>	CASING TEST AND CEMEN	T JOB []	
OTHER: Convert to Injection	X	OTHER:		
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.				
, DIR I DE ODIGETOUR -				
1. PULL PRODUCTION EQUIPMENT. 2. DRILL OUT CIBP AT 4233				
46 17 70 1				
3. OPEN ADDITIONAL PAY. 4. ACID STIMULATE OPEN PERFS. 5. RUN INJECTION EQUIPMENT. Conversion per Division rule R-6199-B. Pg 12 (Other 30 well list)				
5. RUN INJECTION EQUIPMENT.			\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	2,
			(i, a) (i)	[2]
Conversion per Division rule R-6199-B, Pg 12 (Other 30 well list).				
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			1508.65	
			2050 1 - 1805 64 64 64 64 64 64 64 64 64 64 64 64 64	
I hereby certify that he information above is the	e and complete to the best of my knowle	dge and belief.		
SIGNATURE () ()		COUNTY VI		/ (- 22
	` ` ` `	TITLE PROD ENGR	DATE	6-10.03
TYPE OR PRINT NAME D. NELSON		<u> </u>	TELEPHONE NO.	505/397-8200
(This space for State Use)				
APPROVED BY APPROVAL FANY: OC FIELD REPRESENTATIVE II/STAFF MANAGER DATE DATE DATE DATE DATE DATE DATE DATE				
APPROVEDBY	when oc FIELD	REPRESENTATIVE II/STA	TATE.	