State of New Mexico Energy, Minerals and Natural Resources Department

DISTRICT I

OIL CONSERVATION DIVISION

310 Old Santa Fe Trail, Room 206 Santa Fe, New Mexico 87503	WELL API NO. 30-025-07377
	5. Indicate Type of Lease
	FED STATE FEE X
	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	7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101 FOR SUCH PROPOSALS.)	NORTH HOBBS (G/SA) UNIT
1. Type of Well:	
Oil Well Gas Well Other Temporarily Abandoned 2. Name of Operator OCCIDENTAL PERMIAN LTD.	8. Well No. 221
	6. Well 140. 221
3. Address of Operator 1017 W. STANOLIND RD.	9. Pool name or Wildcat HOBBS (G/SA)
	HOBBS (G/SA)
4. Well Location	
Unit Letter F : 2310 Feet From The NORTH Line and 1320 Fee	t From The WEST Line
Section 20 Township 18-S RANGE 38-E	NMPM LEA County
10. Elevation (Show whether DF, RKB, RT GR, etc.) 3654' DF	
11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND REMEDIAL WORK ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OP	NS. PLUG & ABANDONMENT
PULL OR ALTER CASING CASING TEST AND CEMEN	
OTHER: OTHER: Casing Integrity	Test – TA status X
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: 05/29/03	
PRESSURE READING: INITIAL - 590 PSI; 15 MIN - 590 PSI; 30 MIN - 585 PSI	
LENGTH OF PRESSURE READING: 30 MIN	
TEST WITNESSED: YES	E. 200
1201 1111 1250221 125	
	W. L.
This Approval of Temporary	
Abandonment Expires 6/18/6	S. C.
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	200
SIGNATURE Steve W Drea TITLE ENGINEERING	G TECH DATE 06/16/03
TYPE OR PRINT NAME STEVE W JONES	TELEPHONE 505/397-8228
	NO. 503/377-0228
APPROVED BY LOUIS ON FIELD REPRESENTATIVE II/STAFF MANAGER DATE JUN 1 8 2003	
CONDITIONS OF APPROVAL IF ANY:	

