State of New Mexico Energy, Minerals and Natural Resources Department

DISTRICT I

OIL CONSERVATION DIVISION

OIL CONSERVATION DIVISION	
1625 N. FRENCH DRIVE, HOBBS, NM 88240 310 Old Santa Fe Trail, Room 206 Santa Fe, New Mexico 87503	WELL API NO. 30-025-12491
, , , , , , , , , , , , , , , , , , ,	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 DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101 FOR SUCH PROPOSALS.)	7. Lease Name or Unit Agreement Name 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. 341
	6. WEII NO. 341
3. Address of Operator 1017 W. STANOLIND RD.	9. Pool name or Wildcat HOBBS (G/SA)
4. Well Location	L
Unit Letter O: 330 Feet From The SOUTH Line and 2310 Feet From The EAST Line	
Section 19 Township 18-S RANGE 38-E	E NMPM LEA County
10. Elevation (Show whether DF, RKB, RT GR, etc.) 3658' DF	
11. Check Appropriate Box to Indicate Nature of Notice, Report, of	or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK PLUG AND REMEDIAL WORK ABANDON	ALTERING CASING
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OP	PLUG & ABANDONMENT
PULL OR ALTER CASING CASING TEST AND CEMEN	NT JOB
OTHER: OTHER: Casing Integrity	Test – TA status
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	
DDECCHDE DEADING. INITIAL 560 DOL 15 MIN. 545 DOL 20 MIN. 525 DOL	
PRESSURE READING: INITIAL - 560 PSI; 15 MIN - 545 PSI; 30 MIN - 535 PSI	VO11 18 19 20 <7
LENGTH OF PRESSURE READING: 30 MIN	A L
TEST WITNESSED: YES	17 18 19 20 27 28 27 18 19 20 27
INIC ANDROUS AS TAMBARAMAN I I I WAS NOW AND	
Abandonment Expires 6 18/08	
	- COC
	15398
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
SIGNATURE STEVE W Dres TITLE ENGINEERING	G TECH DATE 06/16/03
TYPE OR PRINT NAME STEVE W JONES	TELEPHONE 505/397-8228
(This space for State Use) OC FIELD REPRESENTATIVE II/STAFF MANAGER UNA 1 0 2002	
Θ	JUN 1 8 2003
APPROVED BY LOUIS OF APPROVAL IT ANY.	DATE
CONDITIONS OF APPROVAL IF ANY:	

