

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 5-27-2004

FILE IN TRIPLICATE

OIL CONSERVATION DIVISION

DISTRICT I
1625 N. French Dr. , Hobbs, NM 88240

1220 South St. Francis Dr.
Santa Fe, NM 87505

DISTRICT II
1301 W. Grand Ave, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd, Aztec, NM 87410

WELL API NO.	30-025-07528
5. Indicate Type of Lease	STATE ☒ FEE ☒
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name	NORTH HOBBS (G/SA) UNIT Section 32
8. Well No.	111
9. OGRID No.	157984
10. 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 ☒ Gas Well ☐ Other ☐	8. Well No. 111
2. Name of Operator Occidental Permian Ltd.	9. OGRID No. 157984
3. Address of Operator 1017 W. Stanolind Rd., HOBBS, NM 88240 505/397-8200	10. Pool name or Wildcat HOBBS (G/SA)
4. Well Location Unit Letter <u>D</u> : <u>660</u> Feet From The <u>NORTH</u> <u>660</u> Feet From The <u>WEST</u> Line Section <u>31</u> <u>32</u> Township <u>18-S</u> Range <u>38-E</u> NMPM LEA County	
11. Elevation (Show whether DF, RKB, RT GR, etc.) 3646' GR	
Pit or Below-grade Tank Application ☐ or Closure ☐ Pit Type _____ Depth of Ground Water _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____ Pit Liner Thickness _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____	

12. 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 CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG & ABANDONMENT ☐
PULL OR ALTER CASING ☐	Multiple Completion ☐	CASING TEST AND CEMENT JOB ☐	
OTHER: _____	☐	OTHER: _____	☐

13. 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

1. RUPU. Pull production equipment.
2. Stimulate perms 4096-4232 w/2100 g 15% PAD acid.
3. Run Reda ESP equipment, 128 jts 2-3/8" tbg w/drain valve. Intake set @4035'.
4. Install QCI wellhead connection. NU wellhead.
5. RDPU. Clean Location.

Rig Up Date: 08/24/2005
Rig Down Date: 08/26/2005

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCDD guidelines ☐ , a general permit ☐ or an (attached) alternative OCD-approved plan ☐

SIGNATURE Robert Gilbert TITLE Workover Completion Specialist DATE 08/30/2005
TYPE OR PRINT NAME Robert Gilbert E-mail address: robert_gilbert@oxy.com TELEPHONE NO. 505/397-8206

For State Use Only

APPROVED BY Harry W. Wink TITLE OCD FIELD REPRESENTATIVE II/STAFF MANAGER DATE SEP 19 2005
CONDITIONS OF APPROVAL IF ANY: