

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

**HOBBS OCD**  
**DEC 17 2012**

**RECEIVED**

WELL API NO. 30-025-26933
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name North Hobbs (G/SA) Unit Section 25
8. Well No. 422
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 Injector

2. Name of Operator  
Occidental Permian Ltd.

3. Address of Operator  
HCR 1 Box 90 Denver City, TX 79323

4. Well Location  
Unit Letter H : 1550 Feet From The North 1300 Feet From The East Line  
Section 25 Township 18-S Range 37-E NMPM Lea County

11. Elevation (Show whether DF, RKB, RT GR, etc.)  
3660' 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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG & ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	Multiple Completion <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: _____ <input type="checkbox"/>		OTHER: <u>High casing pressure repair</u> <input checked="" type="checkbox"/>	

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.

- RUPU & RU.
- RU wireline & perforate tubing at 4060'. RD wireline.
- ND wellhead/NU BOP.
- POOH w/tubing. RIH and set RBP at 4051'. Test packer from 4085-4051'. Tested OK. Tested casing. Tested OK. POOH W/RBP.
- Attempted to Hydrotest Duoline tubing. Found inside of tubing cracked.
- RIH with Arrowet 1-X dbl grip packer set on 125 jts of new 2-7/8" Duoline tubing. Packer set @4085'.
- Test casing to 580 PSI for 30 minutes and chart for the NMOCD.
- NU wellhead/ND BOP.
- RDPU & RU. Clean location and return well to injection.

*Perfs 4167-4334*

RUPU 10/11/2012 RDPU 10/22/2012

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 NMOCD guidelines , a general permit  or an (attached) alternative OCD-approved plan

SIGNATURE Mendy A. Johnson TITLE Administrative Associate DATE 12/14/2012  
 TYPE OR PRINT NAME Mendy A. Johnson E-mail address: mendy\_johnson@oxy.com TELEPHONE NO. 806-592-6280

For State Use Only  
 APPROVED BY Mary Brown TITLE Compliance Officer DATE 12/18/2012  
 CONDITIONS OF APPROVAL IF ANY \_\_\_\_\_

**DEC 19 2012**

START

96 MIN

8 MIN

16 MIN

24 MIN

32 MIN

40 MIN

48 MIN

56 MIN

64 MIN

72 MIN

80 MIN

88 MIN

HOBBS OCD

DEC 17 2012

RECEIVED

Graphic Controls LLC  
(6.375 ARC LINE GRAD.)

9:00 - 9:30 AM

NHSAU-25-422

DATE 10-22-2012  
MCI P 0-1000-8-96MIN

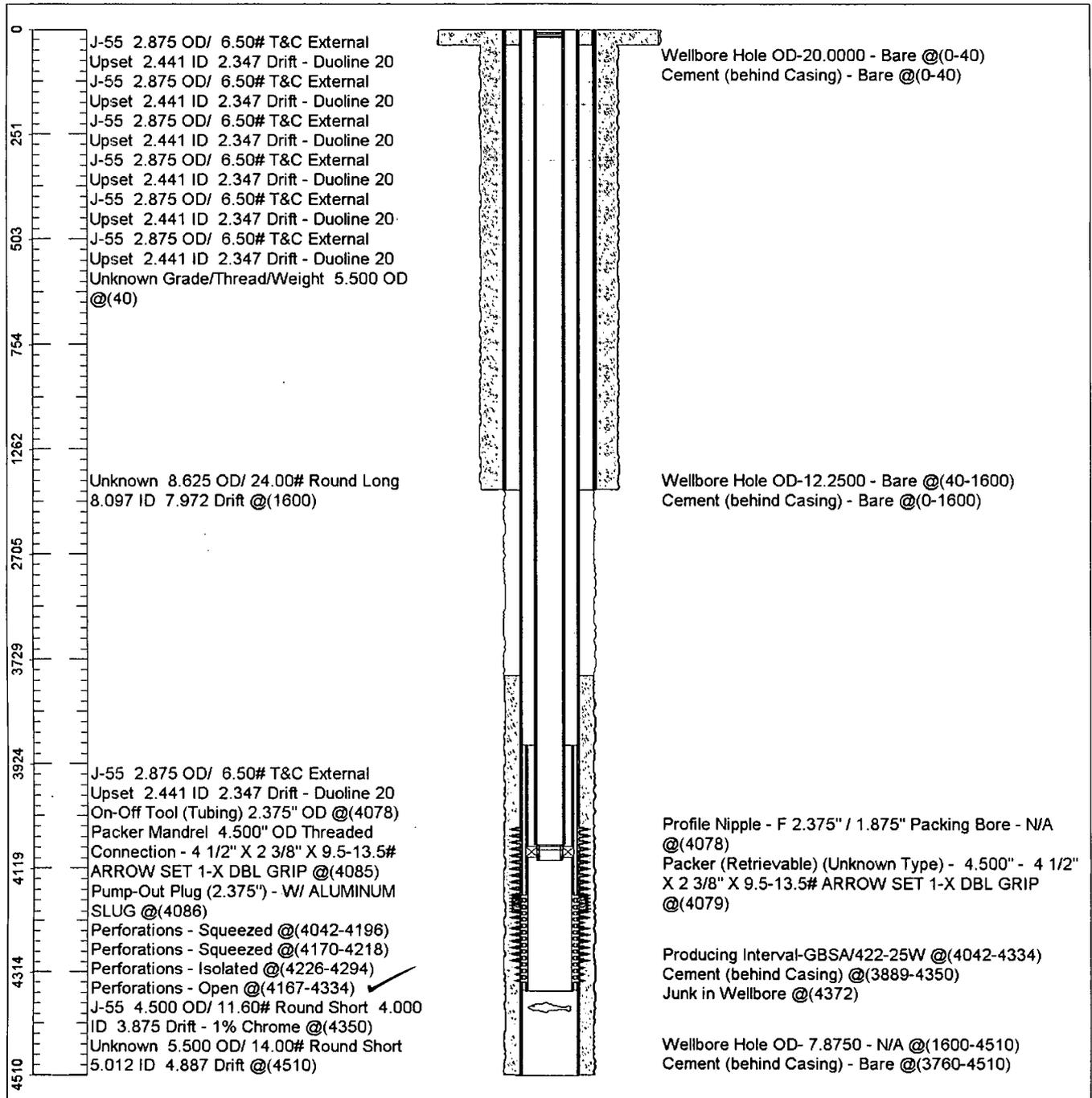
Qty  
API 10-3008526933  
American Valve Metering  
Calibrated on 9-20-2012  
Serial # MFO 2619

*Paul Johnson*

PRINTED IN GREAT BRITAIN

November 13, 2012

## Work Plan Report for Well:NHSAU 422-25



### Survey Viewer