

FILE IN TRIPLICATE

HOBBS 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

JUN 27 2013

DISTRICT III
1000 Rio Brazos Rd, Aztec, NM 87410

RECEIVED

WELL API NO. 30-025-28414
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 24
8. Well No. 413
9. OGRID No. 157984
10. Pool name or Wildcat Hobbs (G/SA)

<p align="center">SUNDRY NOTICES AND REPORTS ON WELLS</p> <p align="center">(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.)</p>	
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <u>Injector</u>	7. Lease Name or Unit Agreement Name North Hobbs (G/SA) Unit Section 24
2. Name of Operator Occidental Permian Ltd.	8. Well No. 413
3. Address of Operator HCR 1 Box 90 Denver City, TX 79323	9. OGRID No. 157984
4. Well Location Unit Letter <u>A</u> : <u>1200</u> Feet From The <u>North</u> Line and <u>206</u> Feet From The <u>East</u> Line Section <u>24</u> Township <u>18-S</u> Range <u>37-E</u> NMPM <u>Lea</u> County	10. Pool name or Wildcat Hobbs (G/SA)
11. Elevation (Show whether DF, RKB, RTGR, etc.) 3663' GL	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> 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 <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> Multiple Completion <input type="checkbox"/> OTHER: _____ <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG & ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER: <u>High casing 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.
- ND wellhead/NU BOP.
- Tested casing to 600 PSI. Tested OK.
- POOH and lay down Duoline tubing.
- Hydrotest back in hole with 128 jts of Duoline 20 tubing replacing all seals. Arrowset 1-X Double grip packer set @4115'
- ND BOP/NU wellhead.
- Test casing to 525 PSI for 30 minute and chart for the NMOCD.
- RDPU & RU. Clean location and return well to injection.

RUPU 03/04/2013
RDPU 03/08/2013

PMX-151

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 06/26/2013
 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 K Brown TITLE Compliance Officer DATE 6/28/2013

CONDITIONS OF APPROVAL IF ANY:

JUL 02 2013

NOON 1

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4

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6 P.M.

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MIDNIGHT

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6 A.M.

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11

600

800

1000

1200

1400

1600

1800

2000

2200

2400

2600

2800

3000

3200

3400

3600

3800

4000

4200

4400

4600

4800

5000

5200

5400

5600

5800

6000

6200

6400

6600

6800

7000

7200

7400

7600

7800

8000

8200

8400

8600

8800

9000

BR 2221

GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK



NORTH HOBBS
WELL # 24-413
UNIT # 24-413
APT # 24-413

UNIT # 24-413
APT # 24-413

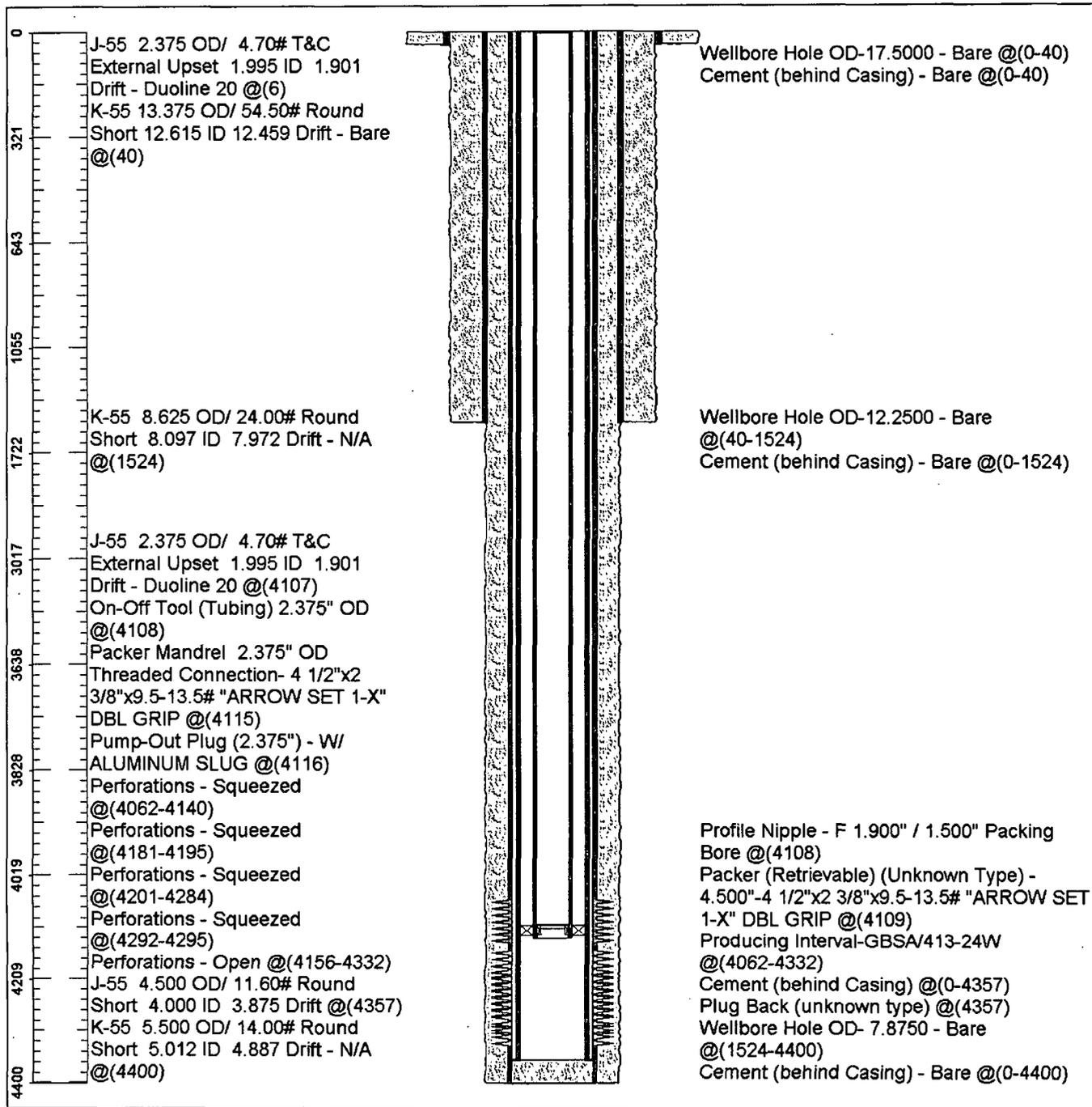
UNIT # 24-413
APT # 24-413

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APT # 24-413

UNIT # 24-413
APT # 24-413

April 24, 2013

Work Plan Report for Well:NHSAU 413-24



Survey Viewer