

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

SEP 09 2013

RECEIVED

WELL API NO. 30-025-37118
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. 641
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

2. Name of Operator: Occidental Permian Ltd.

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

4. Well Location
 Unit Letter A : 940 Feet From The North Line and 815 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.)
 3662' GL

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 <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" 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: _____ <input 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.
- POOH and lay down ESP equipment.
- RIH w/bit. Tag @4380'. POOH w/bit.
- RU wire line and perforate casing @4086-91', 4096-4127' at 4 JSPF. RD wire line.
- RIH w/PPI packer set @3988'. RU HES and pump 6300 gal of 15% PAD acid in 4 settings. RD HES. RU pump truck and pump 100 bbl scale squeeze. Flush w/200 bbl fresh water. RD pump truck. POOH w/PPI packer.
- RIH w/ESP equipment set on 125 jts of 2-7/8" tubing. Intake set @4004'
- ND BOP/NU wellhead.
- RDPU & RU. Clean location and return well to production.

RUPU 08/13/2013 RDPU 08/16/2013

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

SIGNATURE Mendy A Johnson TITLE Administrative Associate DATE 09/06/2013
 TYPE OR PRINT NAME Mendy A. Johnson E-mail address: mendy_johnson@oxy.com TELEPHONE NO. 806-592-6280

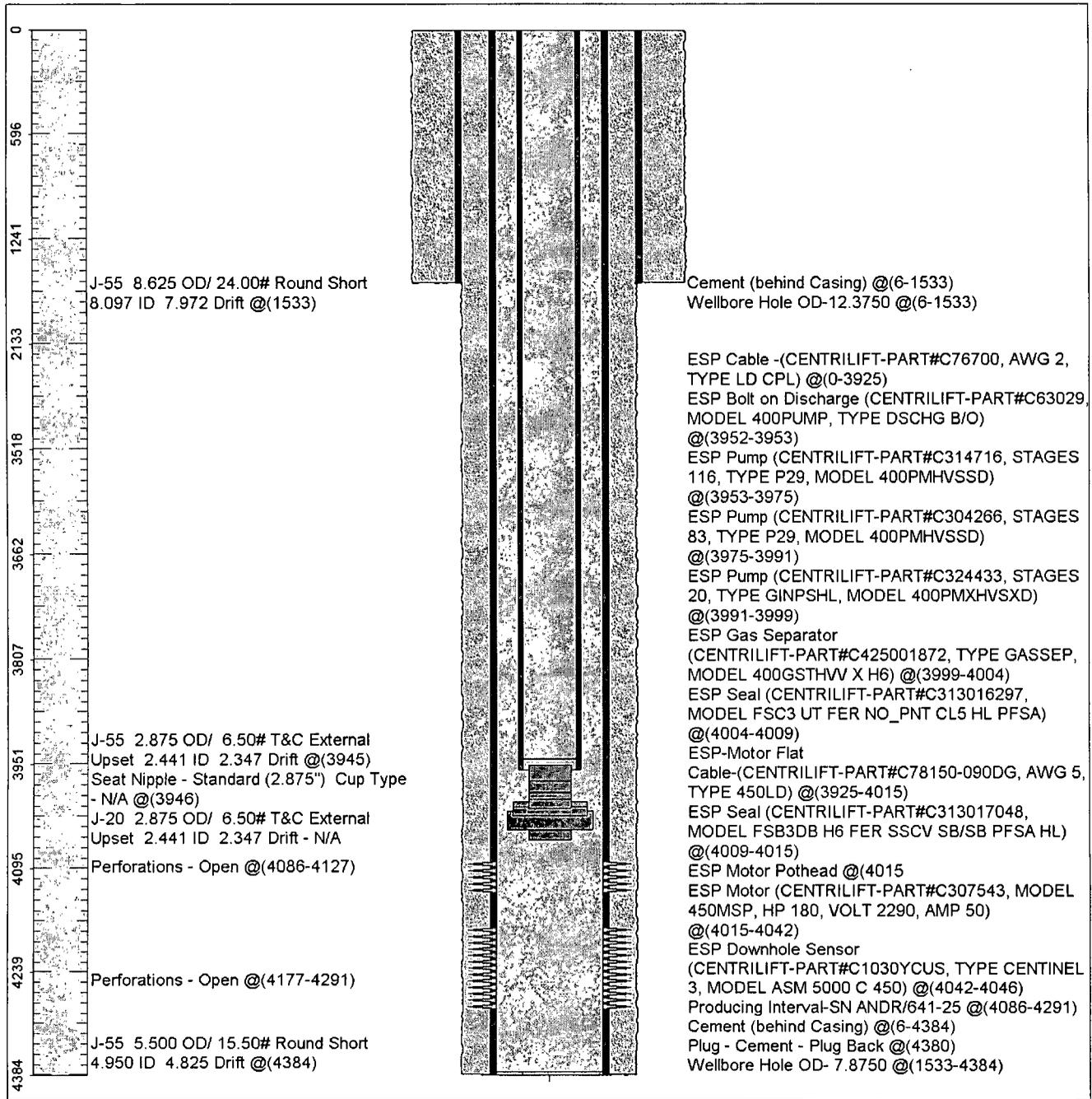
For State Use Only
 APPROVED BY Mark White TITLE Compliance Officer DATE 09-12-2013

CONDITIONS OF APPROVAL IF ANY:

SEP 12 2013

September 6, 2013

Work Plan Report for Well:NHSAU 641-25



Survey Viewer