

FILE IN TRIPLICATE

**OIL CONSERVATION DIVISION**

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

**HOBBS OCD**

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

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

**JUL 01 2014**

**DISTRICT III**  
1000 Rio Brazos Rd, Aztec, NM 87410

WELL API NO. 30-025-07422
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name North Hobbs (G/SA) Unit Section 28
8. Well No. 111
9. OGRID No. 157984
10. Pool name or Wildcat Hobbs (G/SA)

<p><b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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 <input checked="" type="checkbox"/> 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 <u>D</u> : <u>990</u> Feet From The <u>North</u> Line and <u>330</u> Feet From The <u>West</u> Line Section <u>28</u> Township <u>18-S</u> Range <u>38-E</u> <input checked="" type="checkbox"/> NMPM <u>Lea</u> County	
11. Elevation (Show whether DF, RKB, RT GR, etc.) 3644' 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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: _____ <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	OTHER: <u>Casing Integrity Test</u> <input checked="" type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	
Multiple Completion <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.

Date of Test: 06/10/2014

Pressure Readings: Initial - 720 PSI; 15 min - 720 PSI; 30 min - 720 PSI

Length of test: 30 minutes

Witnessed: NO

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 06/27/2014

TYPE OR PRINT NAME Mendy A. Johnson E-mail address: mendy\_johnson@oxy.com TELEPHONE NO. 806-592-6280

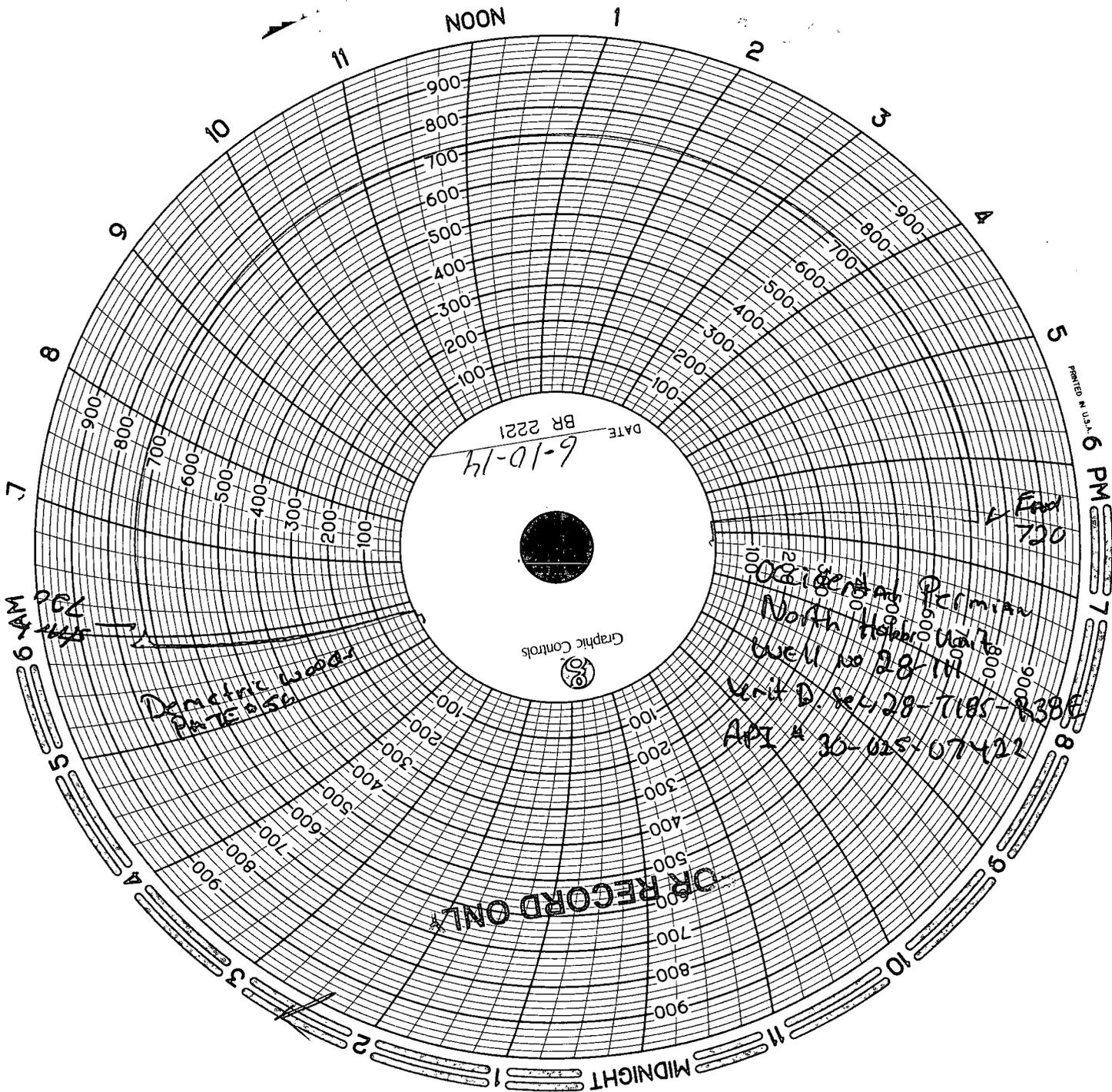
For State Use Only

APPROVED BY Bill Lewamake TITLE Staff Manager DATE 7/8/2014

CONDITIONS OF APPROVAL IF ANY:

JUL 14 2014

*[Handwritten mark]*



NOON

PRINTED IN U.S.A. 6 PM

DATE 6-10-14  
BR 2221

Graphic Controls

Demetric Lines  
DATE 6-14

Original Permian  
North Hobbs Unit  
well no 28-111  
Unit D. Sec. 28-7185-2385  
API # 36-025-07422

OR RECORD ONLY

MIDNIGHT

**American Valve & Meter, Inc.**

1113 W. Broadway  
P.O. Box 166  
Hobbs New Mexico 88240

To: Pate Trucking

Date 04/09/14

This is to certify that:

I Bud Collins \_\_\_\_\_ Technician for American Valve & Meter Inc. has checked the calibration of the following instrument.

8" pressure recorder\_

Serial No. MFG3219

at these points.

Test	Pressure#		Test	Pressure # or Temperature*		
	Found	Left		Found	Left	
- 0	- 0	- 0	-	-	-	
- 500	-	- 500	-	-	-	
- 700	-	- 700	-	-	-	
- 1000	-	- 1000	-	-	-	
- 200	-	- 200	-	-	-	
- 0	-	- 0	-	-	-	

Remarks: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature 

*R*