

FILE IN TRIPLICATE

**HOBBS OCD**

**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

**JUL 01 2014**

DISTRICT III  
1000 Rio Brazos Rd, Aztec, NM 87410

**RECEIVED**

WELL API NO. 30-025-27243 ✓
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. 422 ✓
9. OGRID No. 157984
10. Pool name or Wildcat Hobbs (G/SA)

<p align="center"><b>SUNDRY NOTICES AND REPORTS ON WELLS</b></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 <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>H</u> : <u>2199</u> Feet From The <u>North</u> Line and <u>772</u> Feet From The <u>East</u> Line Section <u>28</u> Township <u>18-S</u> Range <u>38-E</u> ✓ NMPM Lea County	
11. Elevation (Show whether DF, RKB, RT GR, etc.) 3646' KB	
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

<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>Casing Integrity Test</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.

Date of Test: 06/03/2014

Pressure Readings: Initial – 510 PSI; 15 min – 505 PSI; 30 min – 500 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 Semanah TITLE Staff Manager DATE 7/8/2014

CONDITIONS OF APPROVAL IF ANY:

**JUL 14 2014**

*[Handwritten mark]*



**American Valve & Meter, Inc.**  
 1113 W. Broadway  
 P.O. Box 166  
 Hobbs New Mexico 88240

To: Pate Tr.

Date\_04/02/14

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. 7842

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 Bud Collins

*h*