

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. 30-025-28411	<input checked="" type="checkbox"/>
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 33	
8. Well No. 142Z	<input checked="" type="checkbox"/>
9. OGRID No. 157984	
10. Pool name or Wildcat	Hobbs (G/SA)

**SUNDRY NOT RECEIVED 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 I Box 90 Denver City, TX 79323

4. Well Location  
Unit Letter M : 1250 Feet From The South Line and 185 Feet From The West Line  
Section 33 Township 18-S Range 38-E  NMPM Lea County

11. Elevation (Show whether DF, RKB, RTGR, etc.)  
3635' 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

<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: 06/05/2014

Pressure Readings: Initial – 560 PSI; 15 min – 580 PSI; 30 min – 600 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 Lewamakh TITLE Staff Manager DATE 7/8/2014  
CONDITIONS OF APPROVAL IF ANY:

**JUL 14 2014** *h*



**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

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