

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 5-27-2004

FILE IN TRIPLICATE

OIL CONSERVATION DIVISION

DISTRICT I

1625 N. French Dr., Hobbs, NM 88240

DISTRICT II

1301 W. Grand Ave., Artesia, NM 88210

DISTRICT III

1000 Rio Brazos Rd, Aztec, NM 87410

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

WELL API NO.	30-025-07430
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	

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.)		7. Lease Name or Unit Agreement Name NORTH HOBBS (G/SA) UNIT Section 29
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	8. Well No. 221	
2. Name of Operator Occidental Permian Ltd.	9. OGRID No. 157984	
3. Address of Operator 1017 W. Stanolind Rd., HOBBS, NM 88240 505/397-8200	10. Pool name or Wildcat HOBBS (G/SA)	
4. Well Location Unit Letter F : 2310 Feet From The NORTH 1650 Feet From The WEST Line Section 29 Township 18-S Range 38-E NMPM LEA County		
11. Elevation (Show whether DF, RKB, RT GR, etc.) 3642' GR		
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"/>	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.

1. RUPU. Pull ESP production equipment. Clean out to PBTD @4237'.
2. Run CNL/SNG/CCL from 4237' to 3250'.
3. Perforate the following intervals; 4138-58 and 4183-89, using 2 spf, 180 deg sp ph. (56 holes).
4. Stimulate perms 4138-4189 and open hole 4213-37 w/3000 g 15% NEFE HCL acid.
5. RIH w/Reda ESP equipment on 121 jts 2-7/8" tbg. Intake set @3856'.
6. Install QCI wellhead connection.
7. RDPU. Clean Location.

Rig Up Date: 12/09/2005

Rig Down Date: 12/13/2005

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

SIGNATURE Robert Gilbert TITLE Workover Completion Specialist DATE 12/18/2005
TYPE OR PRINT NAME Robert Gilbert E-mail address: robert_gilbert@oxy.com TELEPHONE NO. 505/397-8206

For State Use Only

APPROVED BY Harry W. Wink **OG FIELD REPRESENTATIVE II / STAFF MANAGER** DATE DEC 29 2005
CONDITIONS OF APPROVAL IF ANY: