

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

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

WELL API NO.	30-025-28886
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 30
8. Well No.	242
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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator Occidental Permian Ltd.	
3. Address of Operator 1017 W. Stanolind Rd., HOBBS, NM 88240 505/397-8200	
4. Well Location Unit Letter <u>N</u> : <u>200</u> Feet From The <u>SOUTH</u> <u>1400</u> Feet From The <u>WEST</u> Line Section <u>30</u> Township <u>18-S</u> Range <u>38-E</u> NMPM <u>LEA</u> County	
11. Elevation (Show whether DF, RKB, RT GR, etc.) 3650' 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"/> 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: <u>Convert to Injector</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.

1. RUPU. Pull and lay down production equipment.
2. Sqz perfs 4093-4175' w/200 sx P+ cmt. Clean out to PBTD @4308'.
3. Perforate the following intervals; 4197-4203, 4207-11, 4252-55, 4259-64, 4272-76, 4282-88 using 2 spf, 180 deg sp ph. (68 holes).
4. Stimulate perfs 4197 to 4288 w/2058 g 15% NEFE HCL acid.
5. RIH 5.5" G-6 pc pkr, XL on/off tool w/1.875 ss "F" nipple, 126 jts 2-7/8" Duoline tbq. Set pkr @4006'.
6. Circ csg w/100 bbl pkr fluid. Tst csg to 650 psi for 30 min and chart for the NMOCD.
7. RDPU. Clean Location.

Rig Up Date: 12/22/2005
Rig Down Date: 01/06/2006

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 Robert Gilbert TITLE Workover Completion Specialist DATE 01/26/2006

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. Wank TITLE OG FIELD REPRESENTATIVE II, STATE DATE FEB 07 2006

CONDITIONS OF APPROVAL IF ANY:

State of New Mexico
Energy, Minerals and Natural Resources Department

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8. Well No.	242
PROD No.	157984
Wildcat	HOBBS (G/SA)
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County	

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1. Type of Well:

Oil Well ☒

Gas Well ☐

2. Name of Operator

Occidental Permian Ltd.

3. Address of Operator

1017 W. Stanolind Rd

4. Well Location

Unit Letter N

Pit or P

Pit T

Pit

GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK

N.H.U. 30-242
oxy Permian

1-6-06 details, an
wellbore

NHU

30-242
BR 2221

1-6-06

1324-2526

I hereby
constructed
closed acco.

SIGNATURE

TYPE OR PRINT NAME

For State Use Only

APPROVED BY

CONDITIONS OF APPROVAL IF ANY:

1/26/2006

505/397-8206

DATE