

Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, New Mexico 87505
(505) 476-3440

**SUBMIT ORIGINAL
PLUS 2 COPIES
TO APPROPRIATE
DISTRICT OFFICE**

14-07-00703

APPLICATION FOR
WELL WORKOVER PROJECT

1. Operator and Well

Operator name & address Occidental Permian Limited Partnership P O Box 4294 Houston, Texas 77210-4294							OGRID Number 157984	
Contact Party Karen Ellis M/C 340B							Phone 281-552-1161	
Property Name North Hobbs (G/SA) Unit					Well Number 421	API Number 30-025-12507		
UL H	Section 32	Townshi p 18S	Rang e 38E	Feet From The 2310	North/South Line North	Feet From The 330	East/West Line East	County Lea

II. Workover

Date Workover Commenced: 11/4/02	Previous Producing Pool(s) (Prior to Workover): Hobbs (G/SA)
Date Workover Completed: 11/6/02	

III. Attach a description of the Workover Procedures performed to increase production.

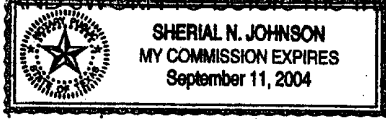
IV. Attach a production decline curve or table showing at least twelve months of production prior to the workover and at least three months of production following the workover reflecting a positive production increase.

V. AFFIDAVIT:

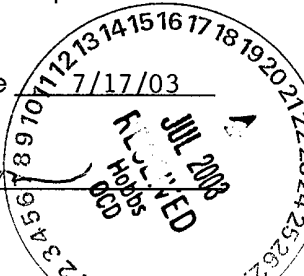
State of Texas)
) ss.
County of Harris)
Karen Ellis, being first duly sworn, upon oath states:

1. I am the Operator, or authorized representative of the Operator, of the above-referenced Well.
2. I have made, or caused to be made, a diligent search of the production records reasonably available for this Well.
3. To the best of my knowledge, this application and the data used to prepare the production curve and/or table for this Well are complete and accurate.

Signature Karen Ellis Title Tax Incentive Analyst Date 7/17/03
SUBSCRIBED AND SWORN TO before me this 17 day of July, 2003.

 Sheri N. Johnson
Notary Public


My Commission expires: _____



FOR OIL CONSERVATION DIVISION USE ONLY:

VI. CERTIFICATION OF APPROVAL:

This Application is hereby approved and the above-referenced well is designated a Well Workover Project and the Division hereby verifies the data shows a positive production increase. By copy hereof, the Division notifies the Secretary of the Taxation and Revenue Department of this Approval and certifies that this Well Workover Project was completed on 4/16/02.

Signature District Supervisor 	OCD District 1	Date 7/22/03
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State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

FILE IN TRIPLICATE

OIL CONSERVATION DIVISION

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

2040 Pacheco St.
Santa Fe, NM 87505

DISTRICT II
811 S. 1st Street, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd, Aztec, NM 87410

WELL API NO. 30-025-12507

5. Indicate Type of Lease
FED ☒ STATE ☐ FEE ☐

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

1. Type of Well:

Oil Well ☒ Gas Well ☐ Other ☐

2. Name of Operator

Oxy Permian

8. Well No. 421

3. Address of Operator

1017 W. Stanolind Rd., HOBBS, NM 88240 505/397-8200

9. Pool name or Wildcat HOBBS (G/SA)

4. Well Location

Unit Letter H : 2310 Feet From The NORTH Line and 330 Feet From The EAST Line
Section 32 Township 18S Range 38E NMPM LEA County

10. Elevation (Show whether DF, RKB, RT GR, etc.)

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG & ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: ☐

12. 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.

1. RUPU. Pull production equipment.
2. Perforate the San Andres Zone at the following intervals; 4046-50, 4053-58, and 4092-99.
3. 2 JSPF and 180 deg spiral
4. Stimulate w/1260 g 15% NEFE HCL Acid.
5. RIH w/ESP equipment on 126 jts 2-7/8" tbg.
6. RDPU. Clean Location.

Well returned to production 11/06/2002

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

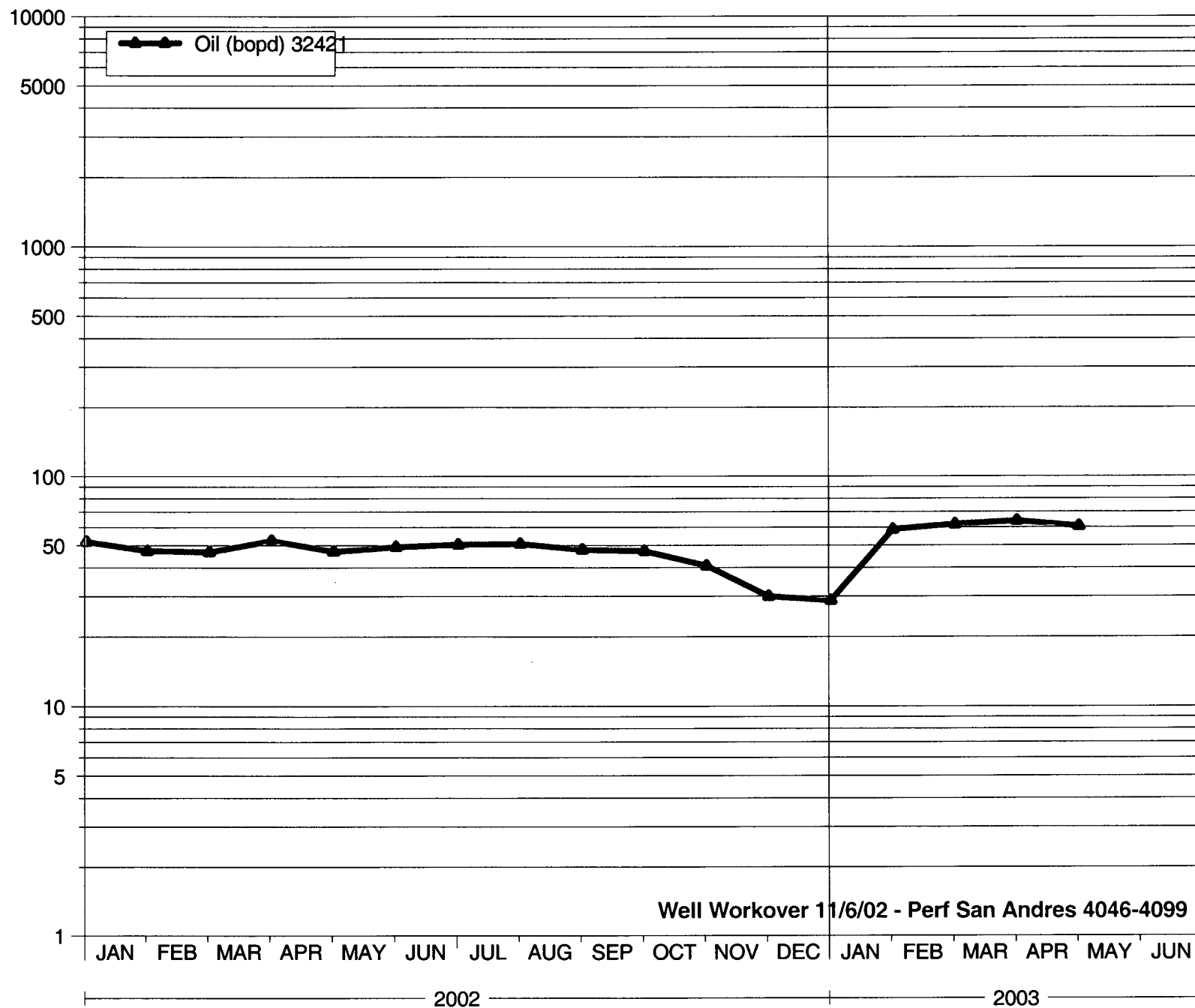
SIGNATURE _____ TITLE SR. ENGR TECH DATE 11/17/2002
TYPE OR PRINT NAME ROBERT GILBERT TELEPHONE NO. 505/397-8206

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL IF ANY:

North Hobbs Unit Well No. 32421



NORTH HOBBS UNIT WELL NO. 32421

DATE	Oil Rate (Cal. Day	Monthly Oil bbl
20020101	52	1609
20020201	47	1328
20020301	47	1452
20020401	53	1576
20020501	47	1458
20020601	49	1480
20020701	51	1566
20020801	51	1575
20020901	48	1438
20021001	47	1465
20021101	41	1224
20021201	30	930
20030101	29	894
20030201	59	1645
20030301	62	1918
20030401	64	1922
20030501	61	1879