

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 5-27-2004

FILE IN TRIPLICATE

OIL CONSERVATION DIVISION

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

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

| | |
|--------------------------------------|---|
| WELL API NO. | 30-025-29891 |
| 5. Indicate Type of Lease | STATE <input checked="" type="checkbox"/> FEE <input checked="" type="checkbox"/> |
| 6. State Oil & Gas Lease No. | |
| 7. Lease Name or Unit Agreement Name | South Hobbs (G/SA) Unit Section 4 |
| 8. Well No. | 220 |
| 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 | HCR 1 Box 90 Denver City, TX 79323 |
| 4. Well Location | Unit Letter <u>C</u> : <u>1425</u> Feet From The <u>North</u> <u>1480</u> Feet From The <u>West</u> Line Section <u>4</u> Township <u>19-S</u> Range <u>38-E</u> NMPM <u>Lea</u> County |
| 11. Elevation (Show whether DF, RKB, RT GR, etc.) 3635' 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 | |
|---|---|
| NOTICE OF INTENTION TO: | SUBSEQUENT REPORT OF: |
| PERFORM REMEDIAL WORK <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/> | COMMENCE DRILLING OPNS. <input type="checkbox"/> |
| OTHER: <u>Open Additional Perfs & Acid Treat Well</u> <input checked="" type="checkbox"/> | PLUG & ABANDONMENT <input type="checkbox"/> |
| | CASING TEST AND CEMENT JOB <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. Pull ESP equipment
2. Perforate hole 4202-4390(63 shots)
3. Acid treat new perfs
4. Acid treat well
5. Run ESP equipment



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

SIGNATURE Mendy A. Johnson TITLE Administrative Associate DATE 05/06/2006
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 Ray W. Wink OGD FIELD REPRESENTATIVE II/STAFF MANAGER DATE _____
CONDITIONS OF APPROVAL IF ANY:

MAY 10 2006