

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. 32-025-28969	
5. Indicate Type of Lease STATE <input 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 COOP Section 34	
8. Well No.	10
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 type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/> Injector <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>K</u> : <u>2564</u> Feet From The <u>South</u> <u>1607</u> Feet From The <u>West</u> Line Section <u>34</u> Township <u>18-S</u> Range <u>38-E</u> NMPM <u>22232</u> Lea County	
11. Elevation (Show whether DF, RKB, RT GR, etc.) 3643' 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: _____	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <u>Stimulate Injection</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 & RU. Pull out of the hole with injection tubing & packer.

2. Clean out to PBTD @4340.

3. Run in hole with cement retainer set @4055'.

4. RU cement truck & pump 1000 gal of Flochek & 300 sxs Prem plus w/2% Cal Chloride & 2% super CBL into tubing. RD cement truck.

5. Drill out retainer @ 4055'. Drill out cement from 4057' to 4180'. Circ clean. Clean out from 4140' to 4208' w/ concave mill. Bad casing @4205'. Drill out @4207' to 4263' (cement & formation in returns). Circ Clean.

6. RU wire line & perforate w/4" perf gun @2 JSPF & 180 degree phase spiral @4141-47', 4152-54', 4160-72', 4181-92', 4196-4201'. RD wireline.

7. Water wash & acid wash open hole from 4263' to 4187' w/2000 gal of 15% HCL. Acidize perms 4141' to 4192' w/350 gal of acid. Swab back.

8. Run back in hole with 5-1/2" Baker Lokset packer, XL on/off tool w/1.781F profile on 129 jts of IPC tubing. Packer set @4015'

9. Test casing to 550 PSI for 30 minutes and chart for NMOCD.

10. RDPU & RU. Clean location.

RUPU 09/25/06 RDPU 10/13/06

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 ☐

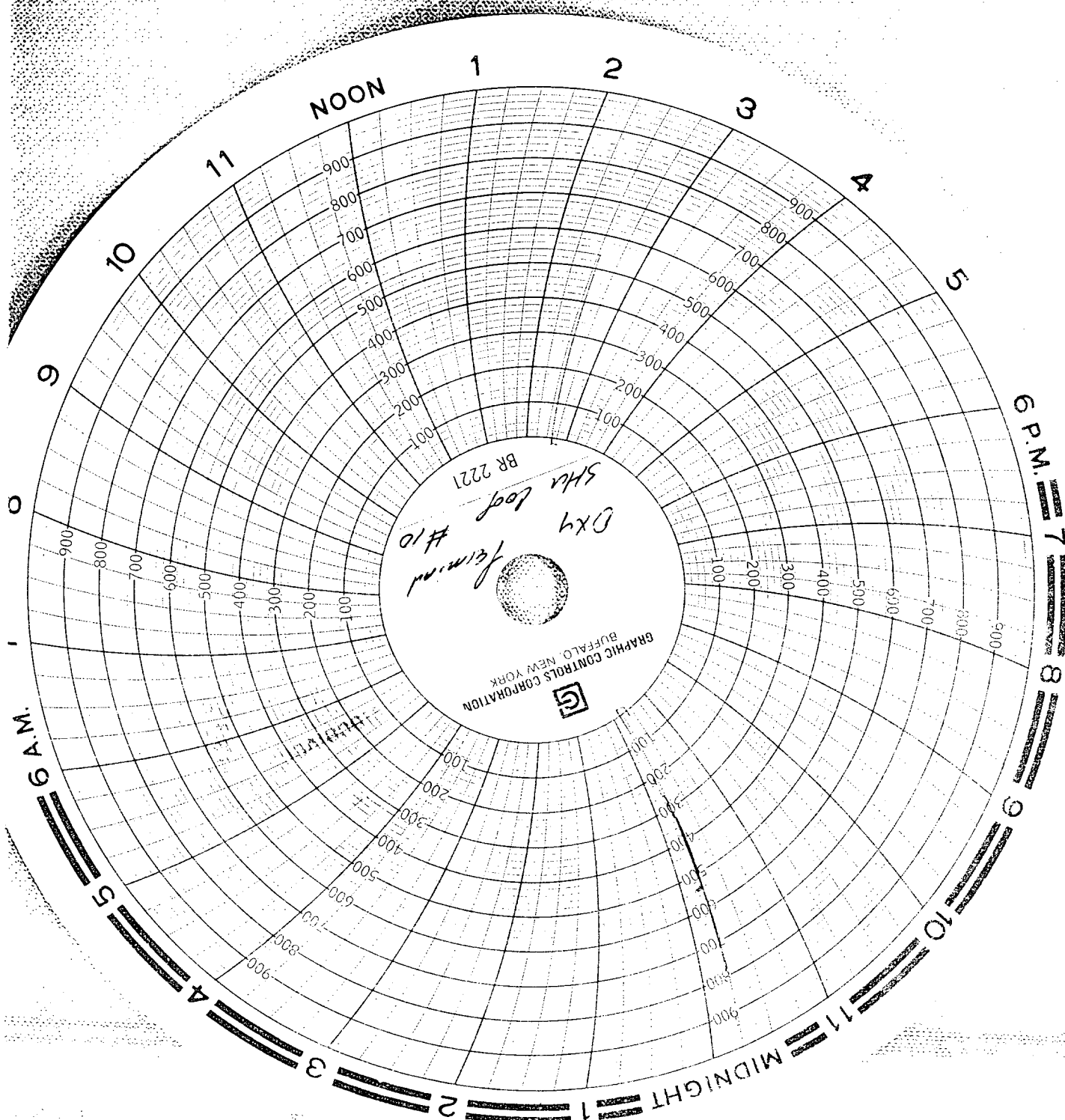
SIGNATURE Mendy A. Johnson TITLE Administrative Associate DATE 10/23/2006

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 Harry W. Wink TITLE OC FIELD REPRESENTATIVE II/STAFF MANAGER DATE OCT 26 2006

CONDITIONS OF APPROVAL IF ANY:



OTY
STH roof
from Billy
#10
firming

SS
1000 #
CAL. B. 22
10/11/09
CHAT
MTG 3916
Keweenaw