State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 5-27-2004

FILE IN TRIPLICATE	OIL CO	ONSERV	ATION DIVISION			CVISCU 3-21-2004	
DISTRICT I	1220 South St. Francis Dr.			WELL API NO.			
1625 N. French Dr., Hobbs, NM 88240	Santa Fe, NM 87505			32-025-34416			
DISTRICT II 1301 W. Grand Ave, Artesia, NM 88210				5. Indicate Type of STAT		FEE	
DISTRICT III				6. State Oil & Gas		TEE 1	
1000 Rio Brazos Rd, Aztec, NM 87410							
SUNDRY NOTICES AND REPORTS ON WELLS				7. Lease Name or U	7. Lease Name or Unit Agreement Name		
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A				,	North Hobbs (G/SA) Unit		
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (Form C-101) for such proposals.)				Section 33	8. Well No. 545		
Type of Well: Oil Well X	Gas Well	Other		6. Well No. 34	3		
2. Name of Operator				9. OGRID No.	157984		
Occidental Permian Ltd.				10 P-1	7:14 4	TI 11 (0/0A)	
3. Address of Operator HCR 1 Box 90 Denver City, TX	79323			10. Pool name or W	viideat	Hobbs (G/SA)	
4. Well Location	. 17323						
Unit Letter G: 1925	Feet From The	North	2100 F	eet From The E	ast	Line	
						Las County	
Section 33	Township 11. Elevation (Show)	18-S whether DF_RI		-E NMPM		Lea County	
	3638' GL						
Pit or Below-grade Tank Application	or Closure						
Pit Type Depth of Grour	d Water Di	stance from n	earest fresh water well	Distance from	nearest surfa	ace water	
Pit Liner Thickness mil			bbls; Construction N				
12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:							
		,				ASING	
PERFORM REMEDIAL WORK	PLUG AND ABANDO	/N	REMEDIAL WORK		ALTERING C		
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE DRILLING C		PLUG & ABA	ANDONMENT []	
PULL OR ALTER CASING	Multiple Completion		CASING TEST AND CEMI	ENI JOB			
OTHER: Acid treat/Open Addition	al Perfs	X	OTHER:				
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. Kill well. Pull out of hole w/ESP equipment.							
2. Clean out well to PBTD @4511'							
3. Perforate hole @4160-68', 4174-76'. 4. Acid treat well with 15% PAD acid.							
1. Kill well. Pull out of hole w/ESP equipment. 2. Clean out well to PBTD @4511' 3. Perforate hole @4160-68', 4174-76'. 4. Acid treat well with 15% PAD acid. 5. Perform scale squeeze. 6. Run back in hole w/ESP equipment.							
6. Run back in hole w/ESP equipment.							
				/*		70	
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					\cce2	150	
					/285/	79797.70	
I hereby certify that the information above is constructed or	true and complete to the be	est of my know	ledge and belief. I further certi	ty that any pit or below-g	grade tank has	been/will be	
closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan							
SIGNATURE Mendy	TO Owh	Mar-	TITLE Administrativ	e Associate	DATE	11/16/2006	
TYPE OR PRINT NAME Mendy A. J	hnson () E-ma	il address:	mendy johnson@oxy.co	m TELEPI	HONE NO.	806-592-6280	
For State Use Only	1.9						
APPROVED BY Jany W	Wink.		OCHED DO		DATE	•	
CONDITIONS OF APPROVALAY ANY:			OCHREED REPRESENT	ative histaff a	MANAGEA		