

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.	30-025-28883
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 29
8. Well No.	37984
9. OGRID No.	37984
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 G-101) for such proposals.)

1. Type of Well:	Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/> Injector
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>G</u> : <u>1430</u> Feet From The <u>North</u> <u>2350</u> Feet From The <u>East</u> Line Section <u>29</u> Township <u>18-S</u> Range <u>38-E</u> NMPM Lea County
11. Elevation (Show whether DF, RKB, RT GR, etc.)	3641' 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"/>	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: Squeeze/Open Add perfs/Acid treat <input checked="" 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. Kill well. Pull injection equipment.
2. Run bit & scraper to PBTD @4335'.
3. Plug back with sand to 4210'. Set CICR @4100'.
4. Squeeze perfs.
5. Drill out squeeze & test to 1000 PSI.
6. Clean out to 4335'.
7. Perforate well w/180 degree phasing spiral, 1 JSPF @4190-95', 4202-05'.
8. Acidize perfs with 1470 gal of 15% HCL acid.
9. Run back in hole with injection equipment.
10. Test casing and chart for NMOCD.

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 01/03/2007  
TYPE OR PRINT NAME Mendy A. Johnson E-mail address: mendy\_johnson@oxy.com TELEPHONE NO. 806-592-6280

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APPROVED BY Larry W. Wink OC FIELD REPRESENTATIVE II/STAFF MANAGER DATE JAN 10 2007  
CONDITIONS OF APPROVAL IF ANY: