

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 5-27-2004

FILE IN TRIPLICATE

**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

**OIL CONSERVATION DIVISION**

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

Received  
Hobbs  
06/01/07

WELL API NO. 30-025-05466

5. Indicate Type of Lease  
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

North Hobbs (G/SA) Unit  
Section 23

8. Well No. 421

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 G-101) for such proposals.)

1. Type of Well:  
Oil Well ☒ Gas Well ☐ Other ☐

2. Name of Operator  
Occidental Permian Ltd.

3. Address of Operator  
HCR 1 Box 90 Denver City, TX 79323

4. Well Location  
Unit Letter H : 1650 Feet From The North 330 Feet From The East Line  
Section 23 Township 18-S Range 37-E NMPM Lea County

11. Elevation (Show whether DF, RKB, RT GR, etc.)  
3681' KB

Pit or Below-grade Tank Application ☐ or Closure ☐  
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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG & ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	Multiple Completion <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: _____ <input type="checkbox"/>		OTHER: <u>Clean out/acid stimulate</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 completion.

1. RUPU. NU BOP. Kill well.
2. Pull out of hole with ESP equipment.
3. RIH w/bit & tag @4300'. No fill. POOH w/bit.
4. RIH w/treating packer set @3954'.
5. RU HES & acid treat open hole 3997'-4300' with 3000 gal of 15% HCL acid & 2000# of gelled rock salt. RD HES. Swab back.
6. RU pump truck & pump 2000 gal of 6490 chemical w/100 bbl of fresh water. Flush w/500 bbl of 10# brine. POOH w/treating packer.
7. RIH w/ESP equipment on 124 jts of 2-7/8" tubing. ND BOP. Intake set @3921'.
8. RDPU. Clean location

I hereby certify that the information above is true and complete to the best of my knowledge and belief. 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 01/24/2007  
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 Larry W. Wink TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL IF ANY:

OC DISTRICT SUPERVISOR/GENERAL MANAGER

JAN 31 2007