## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 5-27-2004

FILE IN TRIPLICATE	OIL CONSERVA	ATION DIVISION		
DISTRICT I 1625 N. French Dr. , Hobbs, NM 88240		St. Francis Dr. NM 87505	WELL API NO. 30-025-07527	
DISTRICT II			5. Indicate Type of Lease	
1301 W. Grand Ave, Artesia, NM 88210			STATE	FEE X
DISTRICT III			6. State Oil & Gas Lease No.	
1000 Rio Brazos Rd, Aztec, NM 87410				
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or Unit Agreen	nent Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A			North Hobbs (G/SA) Unit	
	PPLICATION FOR PERMIT" (Form G1	01) for such proposals.)	Section 32	
1. Type of Well: Oil Well X	Gas Well Other		8. Well No. 131	
Name of Operator     Occidental Permian Ltd.			9. OGRID No. 157984	
3. Address of Operator			10. Pool name or Wildcat	Hobbs (G/SA)
HCR 1 Box 90 Denver City, TX	79323			
4. Well Location  Unit Letter L : 2310	Feet From The South	330 Feet	From The West	Line
	Township 18-S	Range 38-E	NMPM	Lea County
Section 32	11. Elevation (Show whether DF, RK 3634' GL		- 17, <b>10</b>	2004 / July 1
	3034 GL		na Manadia Manadia	
Pit or Below-grade Tank Application	or Closure			
Pit Type Depth of Ground	Water Distance from n	earest fresh water well	Distance from nearest s	urface water
Pit Liner Thickness mil	Below-Grade Tank: Volume			
12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING	CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING OPI	NS. PLUG & A	BANDONMENT
PULL OR ALTER CASING	Multiple Completion	CASING TEST AND CEMEN	T JOB	
OTHER: Squeeze/OAP/Acidize & C		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 ESP equipment. Test liner to 1000 PSI.				
proposed work) SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.  1. Kill well. Pull ESP equipment. Test liner to 1000 PSI.  2. Set RBP @±1400' & rig down for wellhead change out.  3. RU & pull RBP. Run bit & scraper to PBTD @4248'.  4. PB with sand to 4145'. Set CICR @4000'.  5. Squeeze perfs.  6. Prill out squeeze & test to 1000 PSI. CO to PBTD.				
4. PB with sand to 4145'. Set CICR (	@4000'.		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
5. Squeeze perfs.			/ଳ ୁ ହ	a 📆
<ol> <li>Drill out squeeze &amp; test to 1000 PS</li> <li>Perforate well.</li> </ol>	I. CO to PBTD.		2 ★ 5	19202/ 1900 1900
8. Acid treat with 15% HCL PAD acid	d.		\\ <u>\</u>	
9. Run in hole with injection equipme			\& a	10°
10. Test casing & chart for NMOCD.			120%	200
Injection in well will commence per D	ivision Order R-6199-B.		°585\5979	5 25 C
I hereby certify that the information above is		1-1 thelias Konthon contis.	that any nit or holow grade touk	ans been/will be
I hereby certify that the information above is constructed or	true and complete to the best of my know	vieage and benef. Hurther certify	that any pit of below-grade tank	ias been/will be
closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved				
plan				
SIGNATURE NO DOCL	1 (1) Athmir	OTITLE Administrative	Associate DAT	E 01/30/2007
TYPE OR PRINT NAME Mendy A.	ohnson E-mail address:	mendy johnson@oxy.com	TELEPHONE NO	806-592-6280
For State Use Only	January Maria address.			
APPROVED BY Saylu Le and OG FIJELD REPRESENTATIVE II/STAFF MANAGER				
CONDITIONS OF APPROVAL IF ANY:				