

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. 30-025-07470
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 North Hobbs (G/SA) Unit Section 30
8. Well No. 411
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 <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input checked="" 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>A</u> : <u>330</u> Feet From The <u>North</u> <u>330</u> Feet From The <u>East</u> Line Section <u>30</u> Township <u>18-S</u> Range <u>38-E</u> NMPM <u>Lea</u> County	
11. Elevation (Show whether DF, RKB, RT GR, etc.) 3659' 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"/>	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>Squeeze/OAP/Acid Treat</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. Test casing to 900 PSI for 15 min. OK. Kill well. NU BOP.
 2. Pull out of hole with tubing and packer.
 3. RIH w/casing scraper & bit. Tag @4295'. Drop 5 sxs of sand down casing. Tag sand @4252'.
 4. RIH w/CICR set @3979'. RU HES & mix & pump 100 sxs of Premium plus & 200 sxs of Premium plus w/2% Calcium Chloride. Squeeze with 2500 PSI. Sting out of CR. RD HES.
 5. RIH w/bit & drill collars. Tag CICR @3979'. Drill out CICR & cement down to 4250'. Fell out of cement @4280' Wash sand down to 4297'.
 6. RU Schlumberger to perforate well. Could not get down past 4283'. RD wire line.
 7. RIH w/bit & drill collars. Tag @4297'. Drill out from 4297' to 4304'. Drilling on junk.
 8. RU Schlumberger & perforate hole @4197-4207', 4215-18', 4226-44', 4248-65', 4270-82', 4285-87' @1 JSPF. RD wire line.
 9. RIH w/treating packer set @4145'. RU HES acid truck & pump 2500 gals of 15% NEFE. Flush w/30 bbl 10# brine. RD HES acid truck.
- ***see additional data on attached sheet***

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 02/01/2007
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 Gay W. Wink TITLE OC FIELD REPRESENTATIVE DATE 02/01/2007

CONDITIONS OF APPROVAL IF ANY:

FEB 2 2 2007

NHU 30-411 02/01/2007

10. POOH w/treating packer.
11. RIH w/4-1/2" HES injection packer on 132 jts of Duoline 20 tubing w/CO2 rings. **Packer set @ 4145'**
12. ND BOP & NU CPROX tree.
13. Test casing to 600 PSI for 30 minutes and chart for the NMOCD.
14. RDPU & RU. Clean location.

Water /CO2 injection in this well will commence under D. O. R-6199-B.

RUPU 01/05/07

RDPU 01/23/07

