

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.	30-025-37428
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 31
8. Well No.	722
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 C-101) for such proposals.)	
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
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>B</u> : <u>1302</u> Feet From The <u>North</u> <u>2608</u> Feet From The <u>East</u> Line Section <u>31</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.) 3680' KB	
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>Open Additional Perfs/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. RU wireline & shoot holes in tbg 1/2 jt above drain valve. RD wireline.
2. ND wellhead & NU BOP.
3. POOH w/ESP equipment.
4. RIH w/bit tagged @4366'.
5. RU Schlumberger & perforate hole w/19.5 grams select fire casing guns @4147-53', 4156-61' 2 JSPF. RD Schlumberger
6. RIH w/PPI packer set @4083'. RU HES & acid treat perfs @4147-4289' w/3700 gal of 15% PAD acid. RD HES.
7. RU pump truck & perform scale squeeze. POOH w/PPI packer.
8. Run back in hole with ESP equipment on 125 jts of 2-7/8" tubing. Intake set @4106'
9. ND BOP & NU wellhead.
10. RDPU & RU. Clean location.

RUPU 02/08/07 RDPU 02/13/07

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 NMOC guidelines ☐ , a general permit ☐ or an (attached) alternative OCD-approved plan ☐

SIGNATURE Mendy A. Johnson TITLE Administrative Associate DATE 02/26/2007

TYPE OR PRINT NAME Mendy A. Johnson Email address: mendy_johnson@oxy.com TELEPHONE NO. 806-592-6280

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APPROVED BY Gary W. Wink OC FIELD REPRESENTATIVE II/STAFF MANAGER DATE MAR 07 2007

CONDITIONS OF APPROVAL IF ANY: