

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.  
30-025-34643

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 33

8. Well No. 521

9. OGRID No. 157984

10. Pool name or Wildcat Hobbs (G/SA)

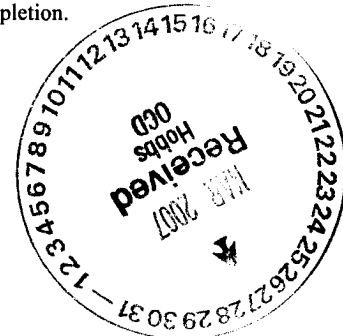
| SUNDRY NOTICES AND REPORTS ON WELLS   |  |
|---|--|
| (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (Form G-101) for such proposals.)   |  |
| 1. Type of Well:<br>Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>   |  |
| 2. Name of Operator<br>Occidental Permian Ltd.  |  |
| 3. Address of Operator<br>HCR 1 Box 90 Denver City, TX 79323  |  |
| 4. Well Location<br>Unit Letter <u>C</u> : <u>990</u> Feet From The <u>North</u> <u>1500</u> Feet From The <u>West</u> Line<br>Section <u>33</u> Township <u>18-S</u> Range <u>38-E</u> NMPM Lea County   |  |
| 11. Elevation (Show whether DF, RKB, RT GR, etc.)<br>3646' GL   |  |
| Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/><br>Pit Type _____ Depth of Ground Water _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____<br>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: _____ <input type="checkbox"/>   | CASING TEST AND CEMENT JOB <input type="checkbox"/>                          |
|   | OTHER: <u>Clean out &amp; 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 drain holes. ND wellhead & NU BOP.
2. Kill well. POOH w/ESP equipment.
3. RIH w/bit & scraper, tag @4300' (50 feet of fill). POOH w/bit & scraper.
4. RIH w/PPI packer set @4048'. RU HES & acidize perms 4104-4260' w/4200 gal of 15% PAD acid. RD HES.
5. Pump 200 gal of 6490 chemical mixed with 100 bbl of fresh water. Flush w/500 bbl fresh water.
6. POOH w/PPI packer.
7. RIH w/ESP equipment on 127 jts of 2-7/8" tubing. Intake set @4025.
8. ND BOP & NU wellhead.
9. RDPU & RU. Clean location.

RUPU 03/08/07 RDPU 03/13/07



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

SIGNATURE Mendy A. Johnson TITLE Administrative Associate DATE 03/23/2007

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 Ray W. Wink OC FIELD REPRESENTATIVE II/STAFF MANAGER

CONDITIONS OF APPROVAL IF ANY:

MAR 29 2007