

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	30-025-37120
5 Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input 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	618
9 OGRID No	157984
10 Pool name or Wildcat	Hobbs (G/SA)

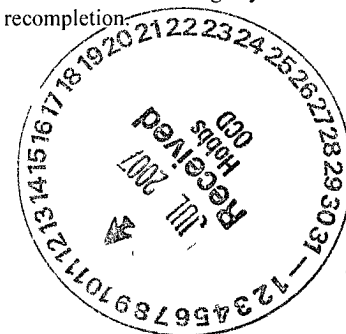
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR USE "APPLICATION FOR PERMIT" (Form G101) for such proposals )	
1 Type of Well	Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>
2 Name of Operator	Occidental Permian Ltd.
3 Address of Operator	HCR I Box 90 Denver City, TX 79323
4 Well Location	Unit Letter <u>L</u> <u>1930</u> Feet From The <u>South</u> <u>850</u> Feet From The <u>West</u> Line Section <u>30</u> Township <u>18-S</u> Range <u>38-E</u> NMPM Lea County
11 Elevation (Show whether DF, RKB, RT GR, etc ) 3654' GR	
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"/>	REMEDIAL WORK <input checked="" 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"/>	PLUG & ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: _____ <input 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. Kill well. ND well head/NU BOP.
2. RU wire line & shoot 4 circulation holes in 2-7/8" tubing @4090'. RD wire line.
3. POOH w/ESP equipment.
4. RIH w/bit. Tag PBTD @4348'. Pull bit up to 4100'.
5. RU pump truck & pump 500 gal of Xylene, 50 gal of 6496. Flush w/15 bbl of 10# brine. POOH w/bit.
6. RIH w/ESP equipment on 125 jts of 2-7/8" tubing. Intake set @4122'.
7. ND BOP/NU wellhead.
8. RDPU. Clean location

RUPU 06/14/07  
RDPU 06/15/07



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

SIGNATURE Mendy A Johnson TITLE Administrative Associate DATE 07/03/200  
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 Gayle Wink TITLE OCD FIELD REPRESENTATIVE II/STAFF MANAGER DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL IF ANY \_\_\_\_\_

JUL 12 2007