

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 5-27-2004

FILE IN TRIPLICATE

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.
Santa Fe, NM 87505

DISTRICT I
1625 N French Dr , Hobbs, NM 88240

DISTRICT II
1301 W Grand Ave, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd, Aztec, NM 87410

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)		WELL API NO 30-025-07077
1 Type of Well Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input checked="" type="checkbox"/> Injector		5 Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2 Name of Operator Occidental Permian Ltd.		6 State Oil & Gas Lease No
3 Address of Operator HCR 1 Box 90 Denver City, TX 79323		7 Lease Name or Unit Agreement Name NORTH HOBBS (G/SA) UNIT Section 30
4 Well Location Unit Letter <u>D</u> <u>330</u> Feet From The <u>NORTH</u> <u>330</u> Feet From The <u>WEST</u> Line Section <u>30</u> Township <u>18-S</u> Range <u>38-E</u> NMPM <u>LEA</u> County		8 Well No <u>111</u>
11 Elevation (Show whether DF, RKB, RT GR, etc) 3650' GR		9 OGRID No <u>157984</u>
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 _____		10 Pool name or Wildcat <u>HOBBS (G/SA)</u>

12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ Multiple Completion ☐
OTHER: _____ ☐

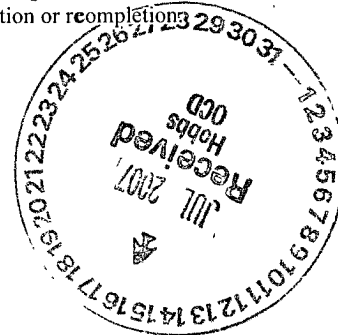
SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG & ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: HCP ☒

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 recompletions

1. RUPU & RU. Kill well & ND wellhead/NU BOP.
2. POOH w/tubing and packer.
3. RIH w/new 4-1/2" G-6 packer on 123 jts of 2-7/8" Duoline 20 tubing. Packer set @4020'.
4. Test casing to 640# and chart for the NMOCD.
5. RDPU & RU. Clean location
6. Return well to injection.

RUPU 06/19/2007
RDPU 06/21/2007



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

SIGNATURE Mendy A. Johnson TITLE Administrative Associate DATE 07/13/2007

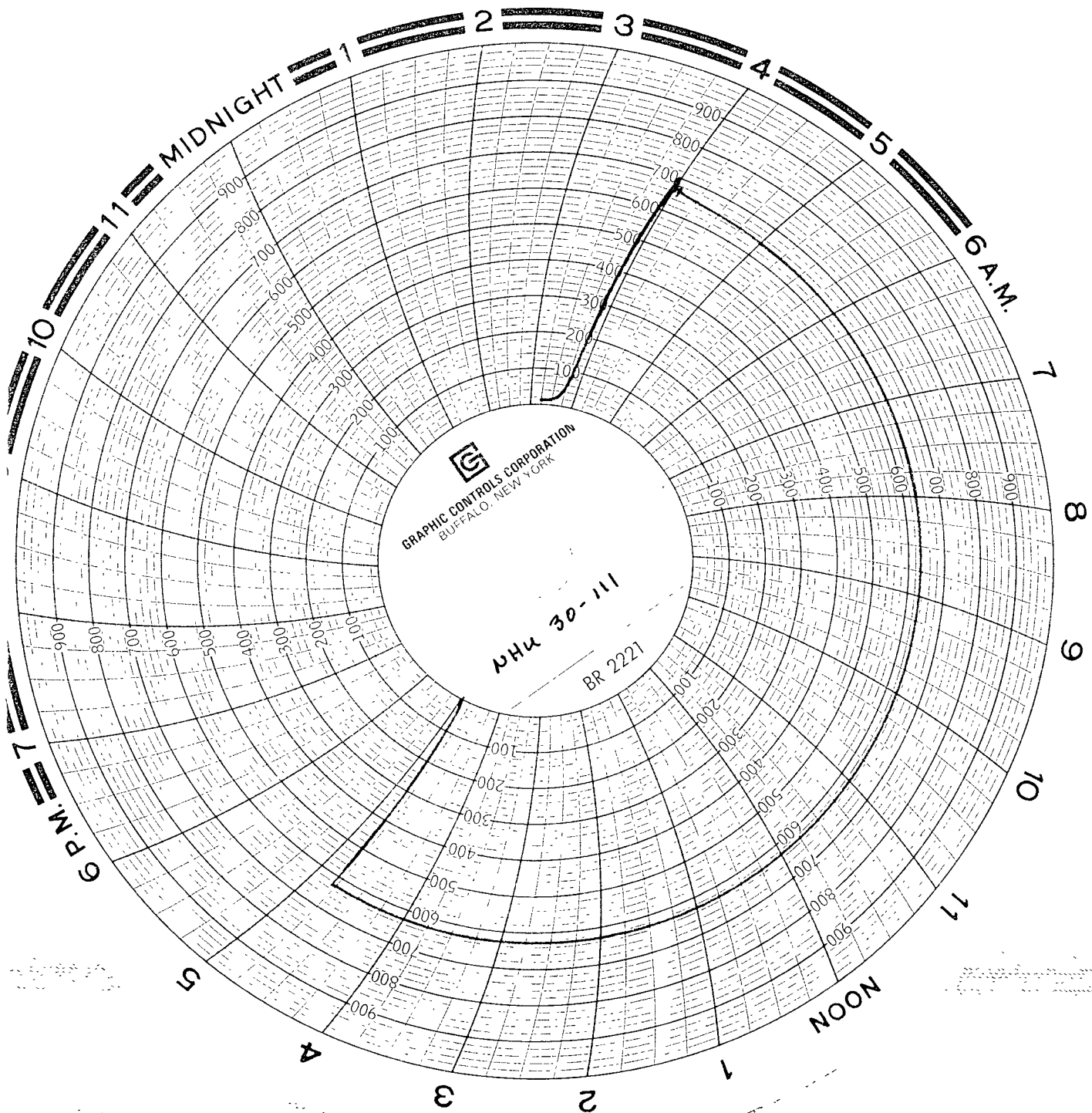
TYPE OR PRINT NAME Mendy A. Johnson E-mail address: mendy_johnson@oxy.com TELEPHONE NO 806-592-6280

For State Use Only

APPROVED BY [Signature] OC FIELD REPRESENTATIVE II/STAFF MANAGER TITLE _____ DATE _____

CONDITIONS OF APPROVAL IF ANY

JUL 16 2007



American Valve & Meters
Rate Tracking Cal. Date 5-17-07
Tech. Bud Collins
Ser # 12517

North Hobbs Unit
30-111
6-20-07