

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

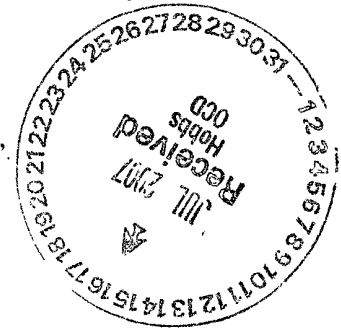
<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR USE "APPLICATION FOR PERMIT" (Form G-101) for such proposals )		WELL API NO 30-025-28883
1 Type of Well Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/> Injector		5 Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input 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 29
4 Well Location Unit Letter <u>G</u> <u>1430</u> Feet From The <u>North</u> <u>2350</u> Feet From The <u>East</u> Line Section <u>29</u> Township <u>18-S</u> Range <u>38-E</u> NMPM <u>Lea</u> County		8 Well No <u>322</u>
11 Elevation (Show whether DF, RKB, RT GR, etc ) 3641' GL		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:		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>Re-perf/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. Kill well. POOH w/tubing & packer.
2. RU pump truck & pump 5 bbl acid down tubing. Flush w/24 bbl of brine. RD pump truck.
3. RU wire line & perforate @4190-92, 4246-60' @1 JSPF. RD wire line.
4. RIH w/ PPI packer set @4260'. Acidize well w/840 gal of 15% HCL acid. POOH w/PPI packer
5. RIH w/4-1/2" G-6 packer w/1.875 F profile on 132 jts of 2-7/8" Duoline 20 tubing. Packer set @4141'.
6. Test casing to 720 PSI for 30 minutes and chart for the NMOCD.
7. RDPU & RU. Clean location.



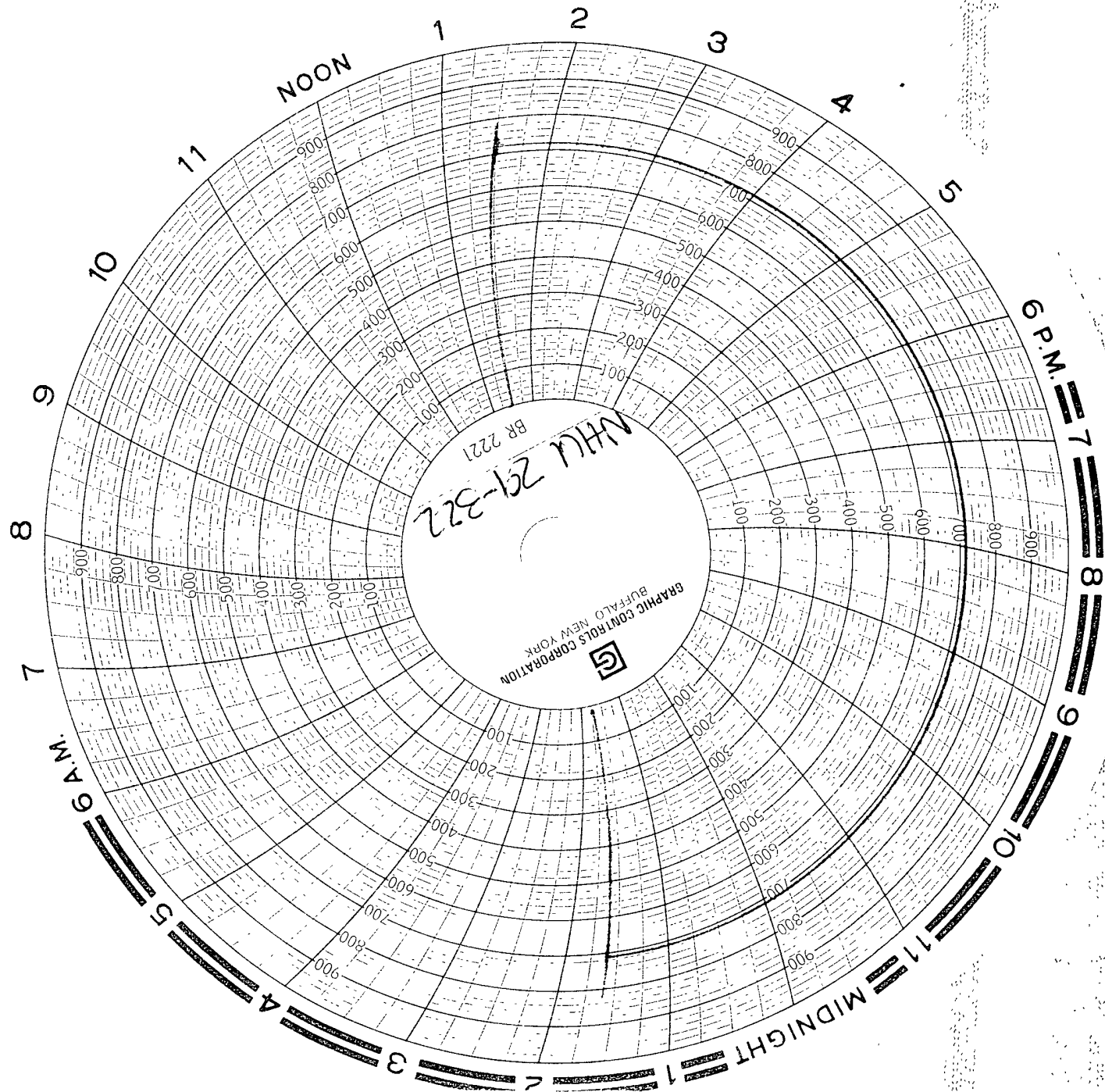
I hereby certify that the information above is true and complete to the best of my knowledge and belief I further certify that any pit or belowgrade tank has been/will be constructed or

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 Hay W. Wink OC FIELD REPRESENTATIVE II/STAFF MANAGER  
CONDITIONS OF APPROVAL ANY TITLE DATE JUL 16 2007



Old Permain  
North Holly Unit  
29-322  
6-14-07

American Valve & Meter.  
Tech. Bud Collins  
Cal. date 5-18-07  
Ser # 12517