State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 5-27-2004

FILE IN TRIPLICATE	OIL CONSERVA	ATION DIVISION	
DISTRICT I 1625 N French Dr , Hobbs, NM 88240		St. Francis Dr. NM 87505	WELL API NO 30-025-07641
DISTRICT II	ŕ		5 Indicate Type of Lease
1301 W Grand Ave, Artesia, NM 88210		•	STATE X FEE
DISTRICT III			6 State Oil & Gas Lease No
1000 Rio Brazos Rd, Aztec, NM 87410			
SUNDRY NOTICES AND REPORTS ON WELLS			7 Lease Name or Unit Agreement Name
(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)			South Hobbs (G/SA) Unit Section 6
1 Type of Well Oil Well Gas Well Other Temporarily Abandoned			8 Well No 26
2 Name of Operator Occidental Permian Ltd.			9 OGRID No 157984
3 Address of Operator			10 Pool name or Wildcat Hobbs (G/SA)
HCR 1 Box 90 Denver City, TX	X 79323		
4 Well Location			
Unit Letter H 1650	Feet From The North	Fee	et From The East Line
Section 6	Township 19-S	Range 38-I	E NMPM Lea County
	11 Elevation (Show whether DF, Rk 3611' RDB	B, RT GR, etc)	
Pit or Below-grade Tank Application or Closure			
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	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING OP	NS. PLUG & ABANDONMENT
PULL OR ALTER CASING	Multiple Completion	CASING TEST AND CEMEN	NT JOB
OTHER			A Status Request X
			1 Status 1totats
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.			
Test Date: 07/03/2007 Pressure Reading: Initial – 540 PSI; 15 min – 540 PSI; 30 min – 540 PSI			
Length of pressure test: 30 minutes			
Witnessed NO This Approval of Temporary 7/3/12			
Abandonment Expires			
			2502122232426 ²⁸
I hereby certify that the information above is true and complete to the best of my knowledge and belief. Ifurther 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 Mention TITLE Administrative Associate DATE 07/17/2007			
TYPE OR PRINT NAME Mendy A.	Johnson E-mail address	mendy_johnson@oxy con	<u>1</u> TELEPHONE NO 806-592-6280
For State Use Only			
APPROVED BY AUTUCULA OF APPROVAL IF AND			
CONDITIONS OF APPROVAL IF ANY		•	i Rese d C Com
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