

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 30-025-28883	
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 29	
8 Well No 322	
9 OGRID No 157984	
10 Pool name or Wildcat Hobbs (G/SA)	

<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 C-101) for such proposals )	
1 Type of Well Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/> Injector	
2 Name of Operator Occidental Permian Ltd.	
3 Address of Operator HCR 1 Box 90 Denver City, TX 79323	
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	
11 Elevation (Show whether DF, RKB, RT GR, etc ) 3641' GL	
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"/>	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>High casing pressure</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.

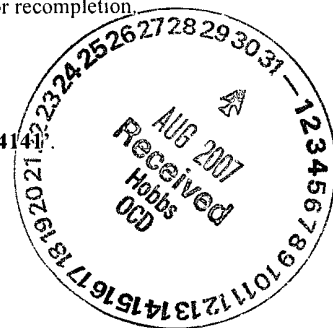
1. RUPU. Kill well. ND wellhead/NU BOP.
2. POOH w/packer & tubing.
3. Send packer in for redress.
4. RIH w/4-1/2" Redressed G-6 packer w/1.875 F profile on 132 jts of 2-7/8" Duoline 20 tubing. Packer set @4145'
5. ND BOP/NU wellhead.
6. Test casing to 680# for 30 minutes & chart for the NMOCD.
7. RDPU. Clean location.

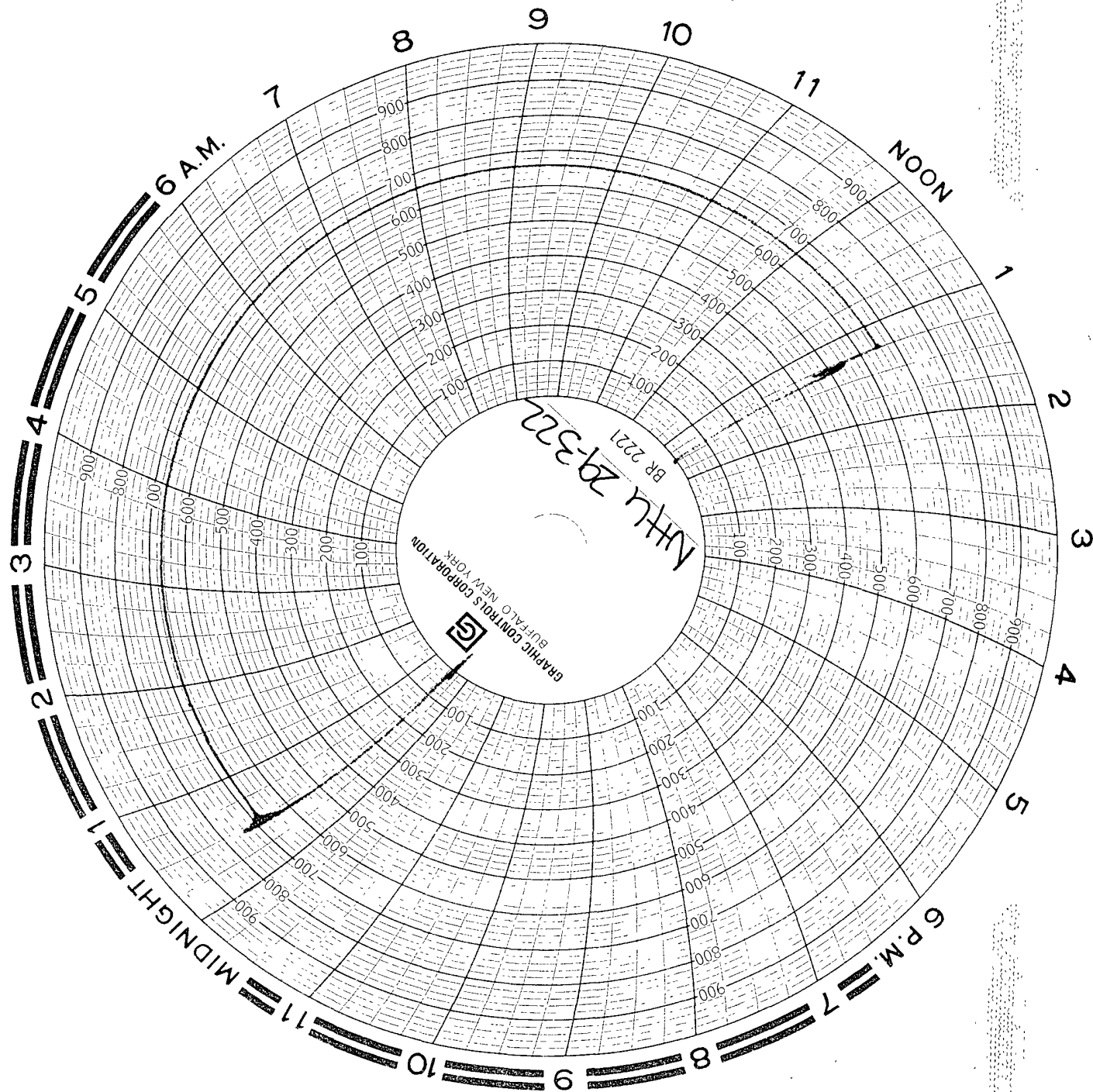
RUPU 08/14/07  
RDPU 08/17/07

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 08/28/2007  
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 Larry W. Wink TITLE OCD FIELD REPRESENTATIVE II/STAFF MANAGER DATE SEP 05 2007  
CONDITIONS OF APPROVAL IF ANY





NH-29-322  
8-17-07  
CAL'DAK 7-25-07  
Unit 2B.

Ben Fisher  
Smith.