

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT 1

1625 N. French Drive, Hobbs, NM 88240

OIL CONSERVATION DIVISION

310 Old Santa Fe Trail, Room 206
Santa Fe, New Mexico 87503

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 C-101 FOR SUCH PROPOSALS.)		WELL API NO. 30-025-07503
		5. Indicate Type of Lease FED <input type="checkbox"/> 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
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/> Injector	SECTION 31	
2. Name of Operator OCCIDENTAL PERMIAN, LTD.	8. Well No. 211	
3. Address of Operator 1017 W STANOLIND RD.	9. Pool name or Wildcat HOBBS (G/SA)	
4. Well Location Unit Letter <u>C</u> : <u>440</u> Feet From The <u>NORTH</u> Line and <u>2310</u> Feet From The <u>WEST</u> Line Section <u>31</u> Township <u>18-S</u> Range <u>38-E</u> NMPM <u>LEA</u> County		
10. Elevation (Show whether DF, RKB, RT GR, etc.) 3642' GL		

11. 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 ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

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

12. 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.

RUPU. Lay down injection equipment.
Cut off and replace wellhead for CO2 service.
Acidize perms 4162-4196 and open hole 4210-4300 w/3500 g 15% NEFE HCL acid.
Run Reda ESP equipment on 129 jts 2-7/8" tbg. Intake set @4058'.
Rig Down Pulling Unit. Clean Location.

Well converted from injector to Producer.

Rig up date: 10/09/2003
Rig down date: 10/14/2003



I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Robert Gilbert TITLE Sr. Engr. Tech DATE 10/15/2003
TYPE OR PRINT NAME Robert Gilbert Phone NO. 505/397-8206

(This space for State Use)

APPROVED BY Larry W. Wink TITLE DISTRICT SUPERVISOR/GENERAL MANAGER DATE OCT 16 2003
CONDITIONS OF APPROVAL IF ANY: