State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 5-27-2004

FILE IN TRIPLICATE OIL CONSERVATION DIVISION WELL API NO 1220 South St. Francis Dr. DISTRICT I 1625 N French Dr , Hobbs, NM 88240 30-025-26973 Santa Fe, NM 87505 5 Indicate Type of Lease DISTRICT II FEE STATE 1301 W Grand Ave, Artesia, NM 88210 6 State Oil & Gas Lease No DISTRICT III 1000 Rio Brazos Rd, Aztec, NM 87410 7 Lease Name or Unit Agreement Name SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A North Hobbs (G/SA) Unit ~ DIFFERENT RESERVOIR USE "APPLICATION FOR PERMIT" (Form C101) for such proposals) Section 32 8. Well No 1 Type of Well Oil Well Gas Well Injector 9 OGRID No 157984 2 Name of Operator Occidental Permian Ltd. 10 Pool name or Wildcat Hobbs (G/SA) 3 Address of Operator HCR 1 Box 90 Denver City, TX 79323 4 Well Location Feet From The 1400 Unit Letter G Feet From The 38-E **NMPM** County Township 18-S Section 11. Elevation (Show whether DF, RKB, RT GR, etc.) 3647' KB Pit or Below-grade Tank Application or Closure Distance from nearest fresh water well ______ Distance from nearest surface water Depth of Ground Water Below-Grade Tank: Volume _____ bbls; Construction Material Pit Liner Thickness Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 12. SUBSEQUENT REPORT OF: NOTICE OF INTENTION TO: ALTERING CASING PERFORM REMEDIAL WORK REMEDIAL WORK PLUG AND ABANDON COMMENCE DRILLING OPNS. **PLUG & ABANDONMENT** TEMPORARILY ABANDON **CHANGE PLANS** CASING TEST AND CEMENT JOB PULL OR ALTER CASING Multiple Completion OTHER: X OTHER. Run liner/perforate/acid treat 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 tbg/casing annulus to 1000 PSIG. 1. Test tbg/casing annulus to 1000 PSIG. 2. Kill well. Pull injection equipment. 3. RIH & set CICR. Squeeze open perfs. 4. Drill out squeeze. Clean out to PBTD. 5. Run liner. 6. Run CBL/CCL/GR from PBTD to surface. 7. Perforate the well. 8. Acid treat the well. 9. Run back in hole w/injection equipment. 10. Test casing & chart for the NMOCD 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 TITLE DATE Administrative Associate 11/08/2007 TYPE OR PRINT NAME TELEPHONE NO E-mail address: mendy_johnson@oxy.com 806-592-6280 Mendy A For State Use Only OC FELD REPRESENTATIVE HATAFF MANAGET DATIFEB 0 6 2008 APPROVED BY

CONDITIONS OF APPROVAL IF ANY

State of New Mexico Energy, Minerals and Natural Resources Department

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| FILE IN TRIPLICATE OIL CONSERVATION DIVISION | |
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| DISTRICT I 1220 South St. Francis Dr. 1625 N French Dr., Hobbs, NM 88240 Santa Fe, NM 87505 | WELL API NO 30-025-07419 |
| <u>DISTRICT II</u> | 5 Indicate Type of Lease |
| 1301 W Grand Ave, Artesia, NM 88210 | STATE FEE X |
| <u>DISTRICT III</u> | 6 State Oil & Gas Lease No |
| 1000 Rio Brazos Rd, Aztec, NM 87410 | 7 Lease Name or Unit Agreement Name |
| 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 G101) for such proposals) | North Hobbs (G/SA) Unit Section 28 |
| 1 Type of Well | 8 Well No 411 |
| Oil Well X Gas Well Other | |
| 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 79323 | |
| 4 Well Location | |
| Unit Letter A 1315 Feet From The North 1115 Fee | t From The East Line |
| Section 28 Township 18-S Range 38-E | NMPM Lea County |
| 11 Elevation (Show whether DF, RKB, RT GR, etc.) | , Bear |
| 3663' GL | |
| Pit or Below-grade Tank Application or Closure | 10173 |
| Distance from pagest surface water well Distance from pagest surface water | |
| District The Construction Material Mate | |
| Pit Liner Thickness mil Below-Grade Tank: Volume bols; Construction Material Received | |
| Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data Hoos NOTICE OF INTENTION TO: SUBSECTENT REPORT OF: | |
| PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING ASING | |
| TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. | |
| PULL OR ALTER CASING Multiple Completion CASING TEST AND CEMENT JOB | |
| OTHER. OTHER | |
| 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 proposedcompletion or recompletion. 1 RUPU. NU BOP. RUPU 10/08/07 RDPU 10/11/07 | |
| 2. Wash sand off of RBP @1011'. Circulate hole clean. | |
| 3. Release & POOH w/RBP @1011' Continue in hole & latch onto RBP @3980'. Release & POOH. | |
| 4. RIH w/tubing, tag @4217'. RU HES cement truck. Spot 4-1/2 bbl cement plug in open hole from 4217-4087'. POOH w/tubing. 5. RIH w/CICR, set @3895' | |
| 6 RU HES & squeeze casing leak @3950-80' & open hole from 4133-4217'. Pumped 331 sxs. Reverse out 29 sxs. RD HES. | |
| 7. RIH w/tubing & tag TOC @1734'. RU HES & pump 25 sxs of cement. Tag TOC @145, bottom | of cement @290'. POOH w/tubing. |
| 8. RU HES & pump 10 sxs of cement from 61' to surface. | |
| 9. ND BOP RD PU. 10 Cut off wellhead 4' below grade & weld labeled plate over casing as per land owner request. Remove anchors & clean location | |
| GPS location of well: North 32° - 43.326' West 103°- 08.916' | |
| | table to a second and be a beauty and beauty |
| 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 SIGNATURE Administrative Associate DATE 11/02/2007 | |
| TYPE OR PRINT NAME Mendy A Johnson E-mail address: mendy johnson@oxy.com | |
| For State Use Only 1/ | |
| APPROVED BY A DATE FEB 0 6 2008 | |
| CONDITIONS OF APPROVAL IF ANY | |

Approved as to plugging of the Well Beach Liability under bond is retained until surface restoration is completed.