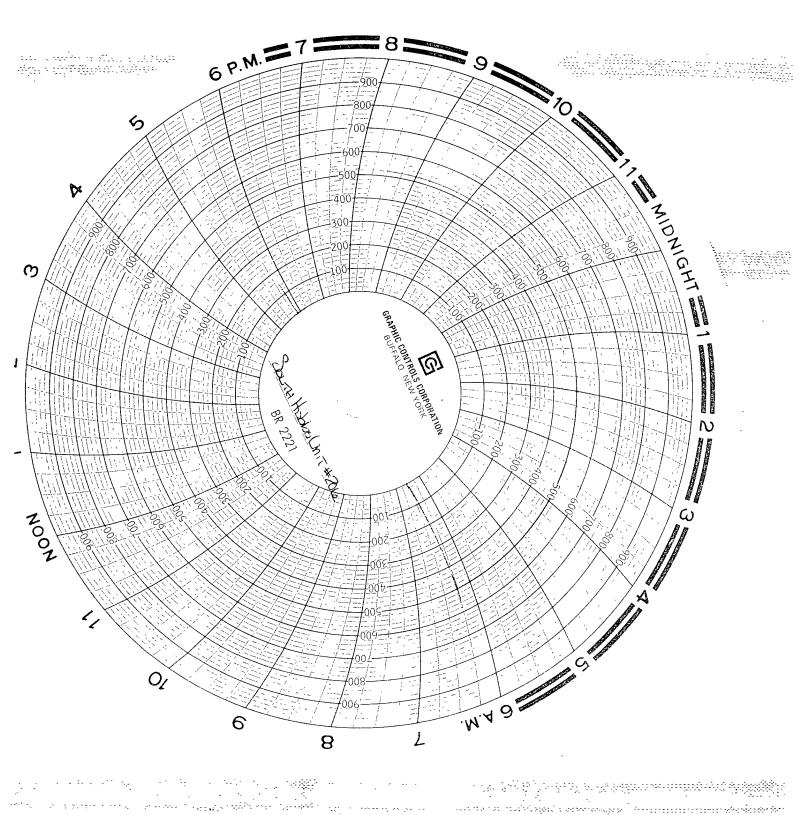
State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 5-27-2004

FILE IN TRIPLICATE **OIL CONSERVATION DIVISION** WELL API NO. DISTRICT I 1220 South St. Francis Dr. 1625 N French Dr., Hobbs, NM 88240 30-025-29519 Santa Fe, NM 87505 5. Indicate Type of Lease DISTRICT II STATE X 1301 W. Grand Ave, Artesia, NM 88210 FEE 6 State Oil & Gas Lease No. **DISTRICT III** 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 South Hobbs (G/SA) Unit DIFFERENT RESERVOIR USE "APPLICATION FOR PERMIT" (Form C-101) for such proposals.) Section 6 8 Well No. 1 Type of Well. 206 Oıl Well Gas Well Other 9. OGRID No 2 Name of Operator 157984 Occidental Permian Ltd. 10. Pool name or Wildcat 3. Address of Operator Hobbs (G/SA) HCR 1 Box 90 Denver City, TX 79323 4. Well Location Feet From The Unit Letter N Line Feet From The 280 1640 North East 19-S Range 38-E **NMPM** County Lea 11. Elevation (Show whether DF, RKB, RT GR, etc.) 3625' GR Pit or Below-grade Tank Application or Closure Depth of Ground Water Distance from nearest fresh water well Distance from nearest surface water Below-Grade Tank: Volume _____ bbls; Construction Material Pit Liner Thickness Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 12. NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS PLUG & ABANDONMENT PULL OR ALTER CASING Multiple Completion CASING TEST AND CEMENT JOB OTHER: OTHER MIT test/TA status request 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: 12/12/2007 Pressure Reading: Initial – 540 PSI; 15 min - 520 PSI, 30 min – 500 PSI Length of pressure test: 30 minutes Witnessed: NO This Approval of Temporary Abandonment Expires 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 closed according to NMOCD guidelines or an (attached) alternative OCD-approved , a general permit plan SIGNATURE TITLE DATE Administrative Associate 12/26/2007 TYPE OR PRINT NAME TELEPHONE NO. Jøhnson Mendy A E-mail address: mendy johnson@oxy.com 806-592-6280 For State Use Only OC FIELD REPRESENTATIVE ILISTAPP MANAGET DATE FEB 0 6 2008 APPROVED BY TITLE

CONDITIONS OF APPROVAL IF ANY.



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