

FILE IN TRIPLICATE

**RECEIVED****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 88201

**DISTRICT III**

1000 Rio Brazos Rd, Aztec, NM 87410

**HOBBS OCD**

MAR 20 2008

WELL API NO. 30-025-35758	
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 33	
8. Well No. 535	
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 checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
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>K</u> : <u>2188</u> Feet From The <u>South</u> <u>2510</u> Feet From The <u>West</u> Line Section <u>33</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.) 3638' GR	
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	
<b>NOTICE OF INTENTION TO:</b> PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> Multiple Completion <input type="checkbox"/> OTHER: _____ <input type="checkbox"/>	<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG & ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER: <u>Repair ESP/ OAP / Acid treat</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 & RU. Kill well. NU BOP/ND wellhead.
2. POOH w/ESP equipment.
3. RU wireline & shoot holes at 2887'. RD wireline.
4. RIH w/bit. Tag @4420'. Clean out wellbore to 4425'. Circulate clean. POOH w/bit.
5. RU wireline & shoot holes @3100'. RD wireline.
6. RIH w/bit from 1500' to 4470'. POOH w/bit.
7. RU wireline & perforate casing @2 JSPF @4334-4340', 4466-4471'. RD wireline.
8. RIH w/PPI packer set @4178'. RU HES and acidize perms w/2400 gal of 15% NEFE. RD HES. POOH w/PPI packer.
9. RIH w/ESP equipment on 133 jts of 2-7/8" tubing. Intake set @4236'.
10. ND BOP/NU wellhead.
11. RDPU & RU. Clean location.

RUPU 01/17/08 RDPU 02/05/08

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 03/19/2008  
 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 [Signature] TITLE PETROLEUM ENGINEER DATE APR 25 2008

CONDITIONS OF APPROVAL IF ANY.