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State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 5-27-2004

FILE IN TRIPLI JUN 11 2008

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.
Santa Fe, NM 87505

DISTRICT I
1625 N. English Dr. Hobbs, NM 88240
DISTRICT II
1301 W. Grand Ave, Artesia, NM 88210
DISTRICT III
1000 Rio Brazos Rd, Aztec, NM 87410

WELL API NO. 30-025-28942
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name North Hobbs (G/SA) Unit Section 30
8. Well No. 233
9. OGRID No. 157984
10. Pool name or Wildcat Hobbs (G/SA)

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.)	
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input checked="" 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>K</u> : <u>2455</u> Feet From The <u>South</u> <u>1480</u> Feet From The <u>West</u> Line Section <u>30</u> Township <u>18-S</u> Range <u>38-E</u> NMPM Lea County 11 Elevation (Show whether DF, RKB, RT GR, etc) 3666' KB	
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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS <input type="checkbox"/>
OTHER: _____	CASING TEST AND CEMENT JOB <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 & RU.
2. Set blanking plug @4106'. Test tubing. OK. Pull blanking plug.
3. Kill well.
4. NU BOP.
5. POOH w/tubing & injection equipment
6. Run back in hole w/new 4-1/2" Arrowset 1-X packer set on 129 jts of 2-7/8" Duoline tubing. Packer set @4102'.
7. ND BOP.
8. Test casing to 540# and chart for the NMOCD.
9. RDPU & RU. Clean location.

RUPU 04/25/08 RDPU 05/03/08

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 06/10/2008
TYPE OR PRINT NAME Mendy A. Johnson E-mail address: mendy_johnson@oxy.com TELEPHONE NO. 806-592-6280

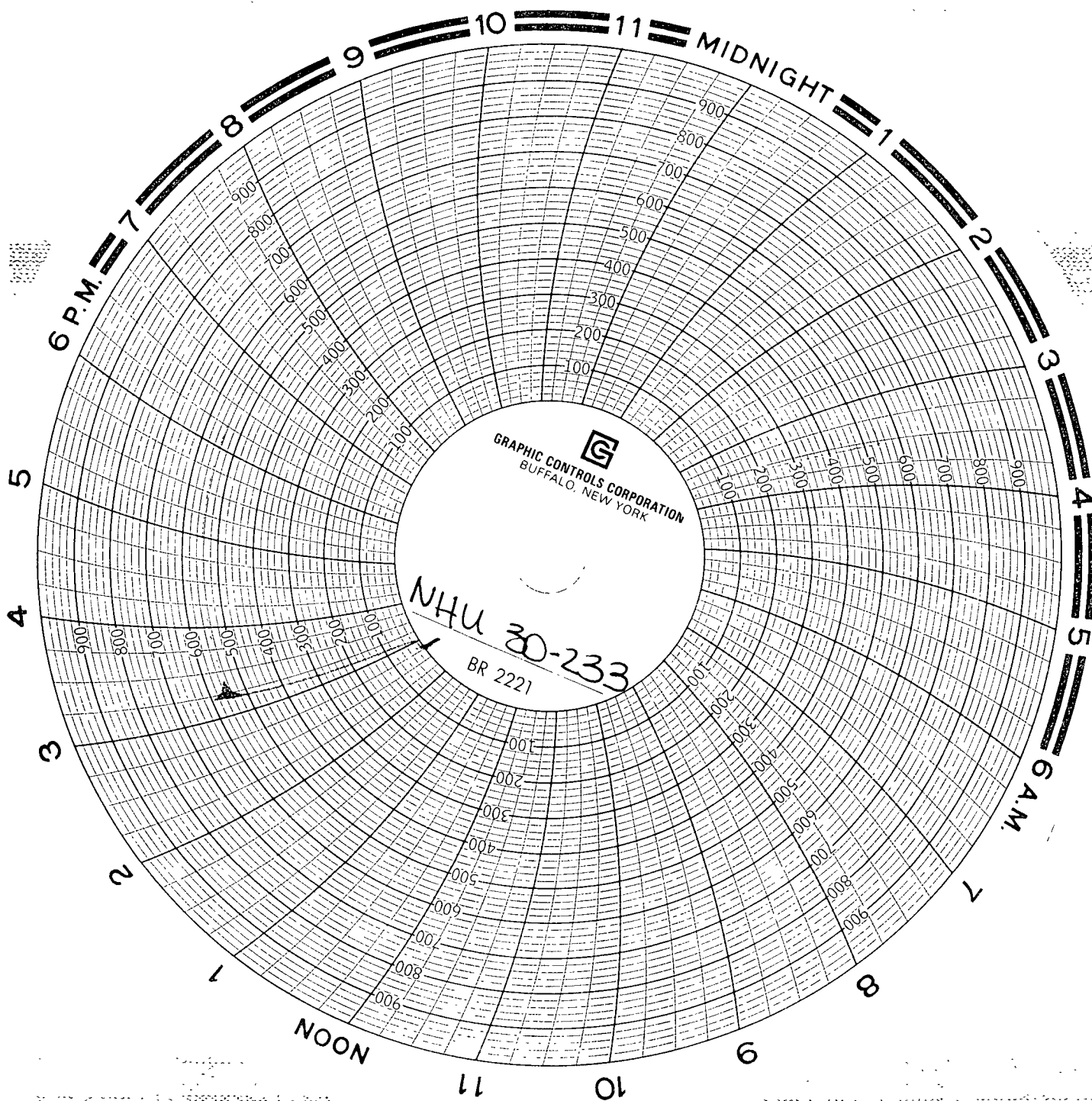
For State Use Only

APPROVED BY

CONDITIONS OF APPROVAL IF ANY:

PETROLEUM ENGINEER

JUN 18 2008



Set # 3219-29-06
CAL DATE

5-3-08-233
WHL-30
B
SMITH'S
BASIC