State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 5-27-2004

FILE IN TRIPLICATE	OIL CONSERVA	ATION DIVISION		
DISTRICT I 1625 N. French Dr., Hobbs, NM 88240	1220 South St. Francis Dr. Santa Fe, NM 87505		WELL API NO 30-025-38114	
DISTRICT II	~·······,		5. Indicate Type of Lease	
1301 W. Grand Ave, Artesia, NM 88210			STATE FEE X	
DISTRICT III			6. State Oil & Gas Lease No.	
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 DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (Form C-101) for such proposals.)		North Hobbs (G/SA) Unit / Section 18		
1. Type of Well:			8 Well No.	
Oil Well Gas Well Other Injector			518	
2 Name of Operator Occidental Permian Ltd.			9. OGRID No. 157984	
3. Address of Operator	***		10. Pool name or Wildcat Hobbs (G/SA)	$\overline{}$
HCR 1 Box 90 Denver City, TX	79323			
4 Well Location	7 7 M 6 1	τ: 1 1020 Γ	t From The West Line	
Unit Letter M : 275	Feet From The South	Line and 1030 Fee		
Section 18	Township 18-S	Range 38-I	NMPM Lea County	
	11. Elevation (Show whether DF, RK 3667' GL	B, RI GR, etc.)		
Pit or Below-grade Tank Application	or Closure			
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 Nate Nation TO:		Other Data SEQUENT REPORT OF:	
PERFORM REMEDIAL WORK X	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING OP	NS. PLUG & ABANDONMENT	
PULL OR ALTER CASING	Multiple Completion	CASING TEST AND CEMEN		
	Waltiple Completion	OTHER:		
OTHER:				\sqsubseteq
13. Describe Proposed or Completed Op proposed work) SEE RULE 1103.	erations (Clearly state all pertinent de For Multiple Completions: Attach w	etails, and give pertinent dates rellbore diagram of proposed	i, including estimated date of starting any completion or recompletion.	
1. Kill well. POOH w/injection equipment.				
2. Clean out to PBTD.				
3. Acid stimulate.4. Run isolation packers.				
5. RIH w/injection equipment.				
6. Test casing and chart for the NMO	CD.	TAL TO CUUS		
7. Return well to injection.				
I hereby certify that the information above is	true and complete to the best of my know	ledge 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) alternativ	e OCD approved	
closed according to NWOCD guidelines	, a general permit	plan	e oeb-approved	
SIGNATURE Mendy	-Clashmir	PITLE Administrative	Associate DATE 05/07/2008	
TYPE OR PRINT NAME Mendy A. J	hnson E-mail address:	mendy_johnson@oxy.com	TELEPHONE NO. 806-592-6280	
For State Use Only		PETROLEUM	ENGINEER	
APPROVED BY	Market	TITLE	ENGINEER JUNET 8 2008	
CONDITIONS OF APPROVAL IF ANY:				
Condition of Approval: Notify OCD Hobbs office 24 hours prior to running MIT Test & Chart.				