

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 5-27-2004

FILE IN TRIPLICATE

**DISTRICT I**

1625 N French Dr., Hobbs, NM 88240

**DISTRICT II**

1301 W. Grand Ave, Artesia, NM 88210

**DISTRICT III**

1000 Rio Brazos Rd, Aztec, NM 87410

**RECEIVED**  
**CONSERVATION DIVISION**

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

JUL 17 2008

**HOBBS OCD**

WELL API NO 30-025-23035
5 Indicate Type of Lease STATE <input 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 32
8 Well No. 232
9 OGRID No 157984
10. Pool name or Wildcat Hobbs (G/SA)

<p align="center"><b>SUNDRY NOTICES AND REPORTS ON WELLS</b></p> <p align="center">(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.)</p>	
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>1980</u> Feet From The <u>South</u> <u>2060</u> Feet From The <u>West</u> Line <u>      </u> Section <u>X 32</u> Township <u>18-S</u> Range <u>38-E</u> NMPM <u>      </u> Lea County <u>      </u>	
11. Elevation (Show whether DF, RKB, RT GR, etc ) 3640' KB	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> Pit Type <u>      </u> Depth of Ground Water <u>      </u> Distance from nearest fresh water well <u>      </u> Distance from nearest surface water <u>      </u> Pit Liner Thickness <u>      </u> mil Below-Grade Tank: Volume <u>      </u> bbls; Construction Material <u>      </u>	

12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data			
<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG & ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	Multiple Completion <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER <u>OAP/Acid treat</u> <input checked="" type="checkbox"/>		OTHER <u>      </u> <input 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 Kill well. POOH w/ESP equipment.
- 2 Clean out to PBTD @4300'.
- 3 Run CNL/GR/CCL log.
- 4 Perforate well.
- 5 Acid treat
- 6 Perform scale squeeze.
- 7 Run back in hole w/production equipment.
- 8 Return well to production

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 NMOC guidelines ☐ , a general permit ☐ or an (attached) alternative OCD-approved plan ☐

SIGNATURE Mendy A. Johnson TITLE Administrative Associate DATE 07/15/2008  
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 Chris Williams TITLE STRICTLY CONFIDENTIAL DATE AUG 07 2008

CONDITIONS OF APPROVAL IF ANY.