

FILE IN TRIPLICATE

RECEIVED**OIL CONSERVATION DIVISION****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

1220 South St. Francis Dr.

Santa Fe, NM 87505

JUL 17 2008

HOBBS OIL

WELL API NO 30-025-35450	
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 24	
8. Well No.	612
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 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>E</u> <u>2220</u> Feet From The <u>North</u> <u>406</u> Feet From The <u>West</u> Line Section <u>24</u> Township <u>18-S</u> Range <u>37-E</u> NMPM <u>Lea</u> County	
11. Elevation (Show whether DF, RKB, RT GR, etc) 3676' GL			
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:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
 TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
 PULL OR ALTER CASING ☐ Multiple Completion ☐
 OTHER: OAP/Acid treat ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
 COMMENCE DRILLING OPNS ☐ PLUG & ABANDONMENT ☐
 CASING TEST AND CEMENT JOB ☐
 OTHER ☐

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 @4390'.
3. Perforate well
4. Acid treat well w/35 bbl of acid.
5. Perform scale squeeze.
6. Run back in hole w/ESP equipment.
7. 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 NMOCD 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

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APPROVED BY Chris Williams TITLE CC DISTRICT SUPERVISOR/GENERAL MANAGER DATE AUG 01 2008

CONDITIONS OF APPROVAL IF ANY.