

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO.
30-025-07673

Indicate Type of Lease
STATE FEE ☒

State Oil & Gas Lease No.

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.)

Lease Name or Unit Agreement Name
South Hobbs (G/SA) Unit

Type of Well:
OIL WELL ☐ GAS WELL ☐ OTHER TA'D Injector

Well No.
92

Name of Operator
Occidental Permian Ltd.

Address of Operator
1017 Stanolind Rd. Hobbs, New Mexico

Pool name or Wildcat
Hobbs (G/SA)

Well Location
Unit Letter M : 660 Feet From The South Line and 660 Feet From The West Line
Section 10 Township 19-S Range 38-E NMPM Lea County

Elevation (Show whether DF, RKB, RT, GR, etc.)

11

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 ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING
COMMENCE DRILLING OPNS. ☐ PLUG AND ANBANDONMENT ☒
CASING TEST AND CEMENT JOB ☐
OTHER: ☐

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.

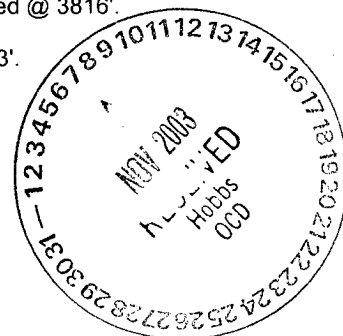
10/20/03 Tagged existing CIBP @ 4063'. Circ. well w/ plugging mud. Spot 25 sks of cement @ 4063'. Tagged @ 3816'.

10/21/03 Spot 25 sks of cement @ 3276' Tagged @ 3032'. Spot 25 sks of cement @ 1667'. Tagged @ 1353'.

10/22/03 Spot 45 sks of cement 400'-surface.

Cut off wellhead and anchors 3' BGL. Capped well. Installed dry hole marker.

Approved as to plugging of the Well Bore.
Liability under bond is retained until
surface restoration is completed.



I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Bobby Gray TITLE PHA Supervisor DATE 10-22-03
TYPE OR PRINT NAME BOBBY GRAY TELEPHONE NO. 658-7379

(This space for State Use)

APPROVED BY Hayden W. Wink TITLE OC FIELD REPRESENTATIVE II/STAFF MANAGER
CONDITIONS OF APPROVAL, IF ANY

DATE
NOV 10 2003