

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

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| WELL API NO. 30-025-12726 |
| Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> |
| State Oil & Gas Lease No. |

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| 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.) | |
| Type of Well: OIL <input type="checkbox"/> GAS <input type="checkbox"/> WELL <input type="checkbox"/> WELL <input type="checkbox"/> OTHER TA'D Injector | Lease Name or Unit Agreement Name South Hobbs (G/SA) Unit |
| Name of Operator Occidental Permian Ltd. | Well No. 95 |
| Address of Operator 1017 Stanolind Rd. Hobbs, New Mexico | Pool name or Wildcat Hobbs (G/SA) |
| Well Location Unit Letter <u>O</u> : <u>990</u> Feet From The <u>South</u> Line and <u>2310</u> Feet From The <u>East</u> Line Section <u>10</u> Township <u>19-S</u> Range <u>38-E</u> NMPM <u>Lea</u> County | |
| Elevation (Show whether DF, RKB, RT, GR, etc.) 3590' GL | |

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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.

10/22/03 Tagged existing CIBP @ 4078'

10/23/03 Spot 40 sks of cement @ 4078'. Tagged @ 3452'. Circ. well w/ plugging mud. Spot 45 sks of cement @ 1707'. Tagged @ 1520'

10/24/03 Spot 70 sk surface plug @ 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 PTA Supervisor DATE 10-24-03
TYPE OR PRINT NAME BOBBY GRAY TELEPHONE NO 658-7379

(This space for State Use)

APPROVED BY

Darryl W. Wink

OC FIELD REPRESENTATIVE II/STAFF MANAGER
TITLE

NOV 10 2003
DATE

CONDITIONS OF APPROVAL, IF ANY: