

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I

1625 N. French Drive, Hobbs, NM 88240

OIL CONSERVATION DIVISION

310 Old Santa Fe Trail, Room 206
Santa Fe, New Mexico 87503

WELL API NO. 30-025-07491

5. Indicate Type of Lease
FED ☐ STATE ☐ FEE ☒

6. 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.)

1. Type of Well:
Oil Well ☐ Gas Well ☐ Other TA&d

2. Name of Operator OCCIDENTAL PERMIAN, LTD.

3. Address of Operator 1017 W STANOLIND RD.

7. Lease Name or Unit Agreement Name
NORTH HOBBS (G/SA) UNIT

SECTION 31

8. Well No. 311

9. Pool name or Wildcat
HOBBS (G/SA)

4. Well Location

Unit Letter B : 440 Feet From The NORTH Line and 2310 Feet From The EAST Line
Section 31 Township 18-S Range 38-E NMPM LEA County

10. Elevation (Show whether DF, RKB, RT GR, etc.)
3649' GL

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:

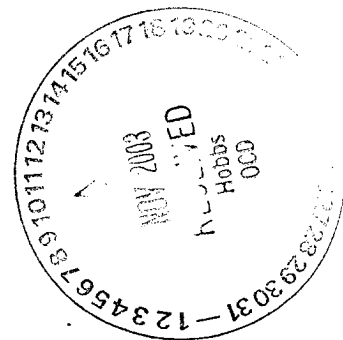
REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG & ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: Return to production ☒

12. 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.

1. RUPU. Shoot 4 sqz holes @500'.
2. Pump 250 sx cmt and circ cmt to surf.
3. Drill out CIBP @3933'.
4. Deepen well to 4270'.
5. Stimulate open hole w/1500 g 15% NEFE HCL acid.
6. Run Reda ESP equipment on 126 jts 2-7/8" tbg. Intake set @3838'.
7. Rig Down Pulling Unit. Clean Location.

Well returned to production.

Rig up date: 10/15/2003
Rig down date: 10/30/2003



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

SIGNATURE Robert Gilbert TITLE Sr. Engr. Tech DATE 10/31/2003
TYPE OR PRINT NAME Robert Gilbert Phone NO. 505-397-8206

(This space for State Use)

OC FIELD REPRESENTATIVE II/STAFF MANAGER

APPROVED BY Gayle W. Wink TITLE _____ DATE _____

CONDITIONS OF APPROVAL IF ANY:

NOV 12 2003