State of New Mexico gy, Minerals and Natural Resources Department

Form C-103 Revised 5-27-2004

FILE IN TRIPLICATE OIL CONSERVATION DIVISION WELL API NO DISTRICT I 1220 South St. Francis Dr. SFP 1 2 2008 30-025-28355 1625 N. French Dr., Hobbs, NM Santa Fe, NM 87505 5 Indicate Type of Lease DISTRICT II STATE X FEE 1301 W Grand Ave, Artesia, N 6 State Oil & Gas Lease No. **DISTRICT-III** 1000 Rio Brazos Rd, Az 7. Lease Name or Unit Agreement Name OTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A South Hobbs (G/SA) Unit DIFFERENT RESERVOIR USE "APPLICATION FOR PERMIT" (Form C-101) for such proposals.) Section 9 1 Type of Well: 8. Well No 152 Oıl Well Gas Well Injector 2. Name of Operator 9. OGRID No 157984 Occidental Permian Ltd 10. Pool name or Wildcat Hobbs (G/SA) 3. Address of Operator HCR 1 Box 90 Denver City, TX 79323 4 Well Location Unit Letter Feet From The North Feet From The Section 19-S County 38-E Lea 11. Elevation (Show whether DF, RKB, RT GR, etc.) 3622' KB Pit or Below-grade Tank Application or Closure Pit Type Depth of Ground Water Distance from nearest fresh water well

Distance from nearest surface water Pit Liner Thickness Below-Grade Tank: Volume bbls; Construction Material Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING :--TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PLUG & ABANDONMENT PULL OR ALTER CASING Multiple Completion CASING TEST AND CEMENT JOB OTHER: OTHER: Clean out/OAP/Acid treat X 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/tubing and injection equipment. 2. Clean out to PBTD @4260'. 3. Perforate hole. 4. Acid treat w/2226 gal of 15% NEFE HCL acid. 5. Run back in hole w/injection equipment. 6. Test casing and chart for the NMOCD. 7. Return well to injection. 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** Administrative Associate - DATE 09/11/2008 TYPE OR PRINT NAME TELEPHONE NO Mendy ohnson E-mail address: mendy johnson@oxy.com 806-592-6280 For State Use Only PETROLEUM ENGINEER APPROVED BY DATE

CONDITIONS OF APPROVAL IF ANY