

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 5-27-2004

FILE IN TRIPLECATE 3:0 2008 OIL CONSERVATION DIVISION

TO THE PROPERTY OF THE PROPERT	St. Francis Dr. NM 87505	WELL API NO. 30-025-28357
DISTRICT III	1111 07303	5 Indicate Type of Lease
1301 W. Grand Ave, Artesia, NM 88210		STATE X FEE
<u>DISTRICT III</u>		6. State Oil & Gas Lease No.
1000 Rio Brazos Rd, Aztec, NM 87410		<u></u>
SUNDRY NOTICES AND REPORTS ON WELLS		7. Lease Name or Unit Agreement Name
(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.)		South Hobbs (G/SA) Unit
1 Type of Well.		8. Well No. 154
	emporarily Abandoned	
2. Name of Operator Occidental Permian Ltd.		9. OGRID No. 157984
3. Address of Operator		10. Pool name or Wildcat Hobbs (G/SA)
HCR Box 90 Denver City, TX 79323		
4. Well Location		
Unit Letter B: 1163 Feet From The North Line and 2600 Feet From The East Line		
Section 9 Township 19-S	Range 38-E	NMPM Lea County
11. Elevation (Show whether DF, RKB, RT GR, etc.)		
3611' 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 mil Below-Grade Tank: Volume bbls; Construction Material		
Fit Lines Thickness thin below-Grade Tank. Volume bots, Construction Material		
12. 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 PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON CHANGE PLANS	COMMENCE DRILLING OPN	IS. PLUG & ABANDONMENT
PULL OR ALTER CASING Multiple Completion CASING TEST AND CEMENT JOB		
OTHER.	,	
Cusing integrity Test 171 Status		
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.		
Test Date: 09/17/2008		
Pressure Reading. Initial – 560 PSI; 15 min - 560 PSI; 30 min – 555 PSI Length of pressure test: 30 minutes		
Pressure Reading. Initial – 560 PSI; 15 min - 560 PSI; 30 min – 555 PSI Abandonment Expires /0-/-2013		
		" Expires ///-/-/ /// /
Length of pressure test: 30 minutes		11 Expires
Length of pressure test: 30 minutes		11 Expires <u>70-7-20/3</u>
Length of pressure test: 30 minutes Witnessed: NO		11 Expires <u>70-7-2013</u>
		it Expires <u>70-7-20/3</u>
		1. Expires <u>70-7-2073</u>
Witnessed: NO		
Witnessed: NO I hereby certify that the information above is true and complete to the best of my know		
Witnessed: NO I hereby certify that the information above is true and complete to the best of my know constructed or	ledge and belief. I further certify the	hat any pit or below-grade tank has been/will be
Witnessed: NO I hereby certify that the information above is true and complete to the best of my know		hat any pit or below-grade tank has been/will be
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Witnessed: NO I hereby certify that the information above is true and complete to the best of my know constructed or closed according to NMOCD guidelines , a general permit	ledge and belief. I further certify the or an (attached) alternative plan	hat any pit or below-grade tank has been/will be OCD-approved
I hereby certify that the information above is true and complete to the best of my know constructed or closed according to NMOCD guidelines , a general permit SIGNATURE TYPE OR PRINT NAME Mendy A. Johnson E-mail address:	ledge and belief. I further certify the or an (attached) alternative plan TITLE Administrative of mendy_johnson@oxy.com	nat any pit or below-grade tank has been/will be OCD-approved Associate DATE 09/23/2008 TELEPHONE NO. 806-592-6280
I hereby certify that the information above is true and complete to the best of my know constructed or closed according to NMOCD guidelines , a general permit SIGNATURE TYPE OR PRINT NAME Mendy A. Johnson E-mail address:	ledge and belief. I further certify the or an (attached) alternative plan TITLE Administrative A	nat any pit or below-grade tank has been/will be OCD-approved Associate DATE 09/23/2008 TELEPHONE NO. 806-592-6280

