

**RECEIVED**State of New Mexico  
Energy, Minerals and Natural Resources DepartmentForm C-103  
Revised 5-27-2004

FILE IN TRIPLICATE

OCT 20 2008  
DISTRICT I  
1625 N. French Dr., Hobbs, NM 88240DISTRICT II  
1301 W. Grand Ave., Artesia, NM 88210DISTRICT III  
1000 Rio Brazos Rd, Aztec, NM 87410**OIL CONSERVATION DIVISION**1220 South St. Francis Dr.  
Santa Fe, NM 87505

WELL API NO. 30-025-05499	<input checked="" type="checkbox"/>
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	<input checked="" type="checkbox"/>
6. State Oil & Gas Lease No	
7. Lease Name or Unit Agreement Name North Hobbs (G/SA) Unit Section 25	<input checked="" type="checkbox"/>
8. Well No. 441	<input checked="" type="checkbox"/>
9. OGRID No. 157984	<input checked="" type="checkbox"/>
10. Pool name or Wildcat	Hobbs (G/SA)

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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 <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <u>Injector</u>	
2. Name of Operator Occidental Permian Ltd.	
3. Address of Operator HCR 1 Box 90 Denver City, TX 79323	
4. Well Location Unit Letter <u>P</u> <u>990</u> Feet From The <u>South</u> <u>330</u> Feet From The <u>East</u> Line Section <u>25</u> Township <u>18-S</u> Range <u>37-E</u> NMPM Lea County	
11. Elevation (Show whether DF, RKB, RT GR, etc.) 3667' DF	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> 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 _____	

12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data			
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG & ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	Multiple Completion <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER <input type="checkbox"/>		OTHER: <u>Squeeze perms &amp; acid treat</u>	<input checked="" type="checkbox"/>

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. RUPU & RU ND wellhead/NU BOP. RUPU 09-05-08 RDPU 09-11-08
2. POOH w/tubing and injection equipment.
3. RIH w/CICR set @3973'. RU HES squeeze perms 4060-4128' w/60 bbl of cement. Reverse out 24 bbl. Sting out of retainer. RD HES.
4. RIH w/bit & drill collars. Tag @3973'. RU power swivel & stripperhead. Drill through CICR @3973' Drill cement from 3873-4140'. RD power swivel and stripper head Test squeeze to 500#. OK.
5. RU pump truck and spot 5 bbl of 15% down tbg. Flush w/17.5 bbl of 2% KCL. RD pump truck.
6. POOH w/bit & drill collars.
7. RU wireline & perforate well @4060-66', 4073-77', 4084-90', 4098-4104', 4114-20' @2 JSPF. RD wireline.
8. RIH w/5-1/2" G-6 packer set on 125 jts of 2-7/8" tubing. Packer set @3988'.
9. ND BOP/NU wellhead.
10. Test casing to 540# for 30 minutes and chart for the NMOCD. 11. RDPU & RU. Clean location and 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 Mendy A. Johnson TITLE Administrative Associate DATE 10/17/2008  
TYPE OR PRINT NAME Mendy A. Johnson E-mail address: mendy.johnson@oxy.com TELEPHONE NO. 806-592-6280

For State Use Only

APPROVED BY [Signature] TITLE [Signature] DATE OCT 21 2008  
CONDITIONS OF APPROVAL IF ANY:

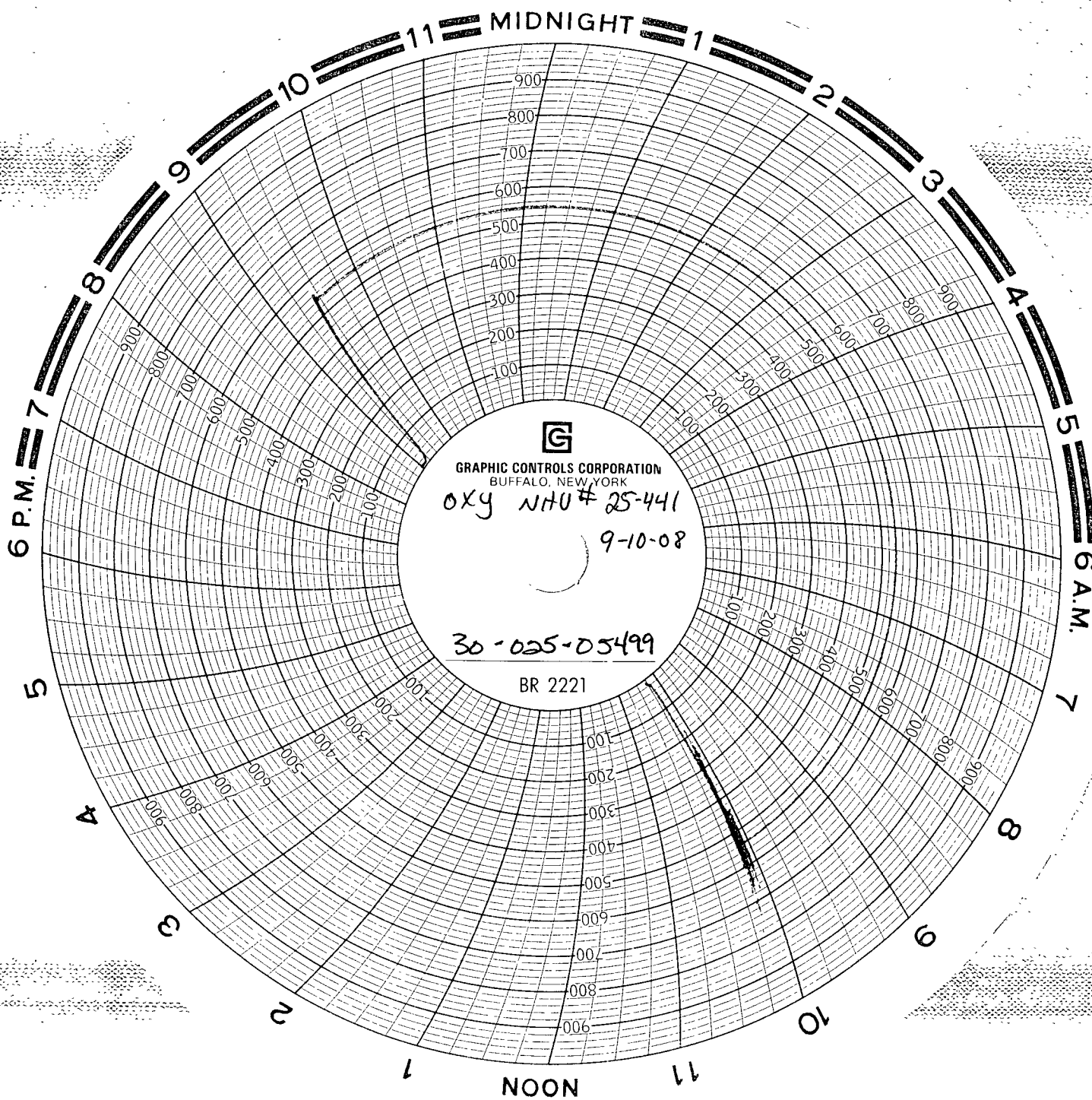


chart Run by Bill Humphrey  
w/Smith Services of Hobbs N.M.  
Pate chart recorder # 3219  
Calibrated 9-5-08