

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

WELL API NO. 30-025-29458
Indicate Type of Lease STATE FEE
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.)		Lease Name or Unit Agreement Name South Hobbs (G/SA) Unit
Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER TA'D	Name of Operator Occidental Permian Ltd.	Well No. 199
Address of Operator 1017 Stanolind Rd. Hobbs, New Mexico	Pool name or Wildcat Hobbs (G/SA)	
Well Location Unit Letter B : 1028 Feet From The North Line and 2310 Feet From The East Line Section 6 Township 19 S Range 38 E NMPM Lea County		
Elevation (Show whether DF, RKB, RT, GR, etc.) 3630' 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: ☐

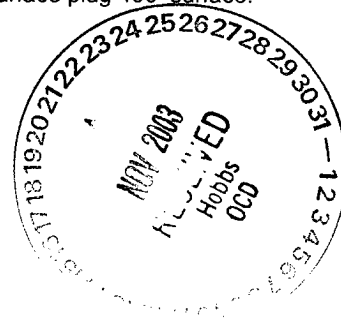
Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

11/10/03 Tagged existing CIBP @ 3964'. Circ. well with plugging mud. Spot 25 sks of c cement 3964'-3717'

11/11/03 Spot 25 sks 2680'. Tagged @ 2420'. Spot 35 sks 1675'. Tagged @ 1362'. Spot 40 sk surface plug 400'-surface.

Cut off wellhead and anchors 3' BGL. Cap well. Install 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 ATA Supervisor DATE 6-11-07
TYPE OR PRINT NAME BOBBY GRAY TELEPHONE NO. 6387379

(This space for State Use)

APPROVED BY Larry W. Wink TITLE OC FIELD REPRESENTATIVE II/STAFF MANAGER DATE NOV 21 2003
CONDITIONS OF APPROVAL IF ANY: