

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 5-27-2004

FILE IN TRIPLICATE

**RECEIVED** CONSERVATION DIVISION

1220 South St. Francis Dr.

FEB 26 2009 Santa Fe, NM 87505

**HOBBSOCD**

DISTRICT I

1625 N French Dr, Hobbs, NM 88240

DISTRICT II

1301 W Grand Ave, Artesia, NM 88210

DISTRICT III

1000 Rio Brazos Rd, Aztec, NM 87410

|   |
|---|
| WELL API NO.<br>30-025-07678  |
| 5. Indicate Type of Lease<br>STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> |
| 6 State Oil & Gas Lease No.   |
| 7. Lease Name or Unit Agreement Name<br>South Hobbs (G/SA) Unit                                     |
| 8. Well No. 76  |
| 9 OGRID No. 157984  |
| 10. Pool name or Wildcat Hobbs (G/SA)   |

|   |   |
|---|---|
| <b>SUNDRY NOTICES AND REPORTS ON WELLS</b><br>(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:<br>Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input checked="" type="checkbox"/> Injector  | 7. Lease Name or Unit Agreement Name<br>South Hobbs (G/SA) Unit |
| 2. Name of Operator<br>Occidental Permian Ltd.  | 8. Well No. 76  |
| 3 Address of Operator<br>HCR 1 Box 90 Denver City, TX 79323   | 9 OGRID No. 157984  |
| 4. Well Location<br>Unit Letter E 1980 Feet From The North Line and 660 Feet From The West Line<br>Section 10 Township 19-S Range 38-E NMPM Lea County  | 10. Pool name or Wildcat Hobbs (G/SA)                           |
| 11. Elevation (Show whether DF, RKB, RT GR, etc.)<br>3607' KB   |   |
| Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/><br>Pit Type _____ Depth of Ground Water _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____<br>Pit Liner Thickness _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____ |   |

|   |  |
|---|--|
| 12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data |  |
| <b>NOTICE OF INTENTION TO:</b>  | <b>SUBSEQUENT REPORT OF:</b>   |
| PERFORM REMEDIAL WORK <input type="checkbox"/>                                | REMEDIAL WORK <input type="checkbox"/>                               |
| TEMPORARILY ABANDON <input type="checkbox"/>                                  | ALTERING CASING <input type="checkbox"/>                             |
| PULL OR ALTER CASING <input type="checkbox"/>                                 | COMMENCE DRILLING OPNS <input type="checkbox"/>                      |
| OTHER: _____  | CASING TEST AND CEMENT JOB <input type="checkbox"/>                  |
|   | OTHER: Mechanical Integrity Test <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.

Test Date: 02/18/2009

Pressure Reading: Initial - 560 PSI; 15 min - 560 PSI; 30 min - 560 PSI

Length of pressure test: 30 minutes

Witnessed: NO

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 02/25/2009  
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 DISTRICT 1 SUPERVISOR DATE FEB 27 2009  
CONDITIONS OF APPROVAL IF ANY.

