

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 5-27-2004

FILE IN TRIPLICATE

OIL CONSERVATION DIVISION

DISTRICT I  
1625 N. French Dr., Hobbs, NM 88240

1220 South St. Francis Dr.  
Santa Fe, NM 87505

DISTRICT II  
1301 W. Grand Ave, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd, Aztec, NM 87410

**RECEIVED**  
**SEP 29 2009**  
**HOBBSOCD**

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

<p align="center"><b>SUNDRY NOTICES AND REPORTS ON WELLS</b></p> <p align="center">(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.)</p>	
<p>1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input checked="" type="checkbox"/> <u>Injector</u></p>	
<p>2. Name of Operator Occidental Permian Ltd.</p>	
<p>3. Address of Operator HCR 1 Box 90 Denver City, TX 79323</p>	
<p>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 <input checked="" type="checkbox"/> Section <u>25</u> Township <u>18-S</u> Range <u>37-E</u> NMPM <u>Lea</u> County</p>	
<p>11. Elevation (Show whether DF, RKB, RT GR, etc.) 3667' DF</p>	
<p>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 _____</p>	

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

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.

- RUPU & RU. RU wireline and set plug in packer @3990'.
- ND wellhead/NU BOP.
- POOH w/tubing and packer.
- RIH w/bit. Tag @4120'.
- RU power swivel. Clean out iron sulfide & pump out plug to 4130'. Drill cement at 4130-4149'. Tag CIBP. Circ clean. Cleanout well from 4149-4151'. Found cement and casing in returns. RD power swivel & POOH w/bit.
- RIH w/Kutrite shoe and drill collars to 4050'. RU power swivel & stripper head. Wash over junk & bad casing @4151-4166'. RD power swivel.
- RU wireline & perforate tubing @3600'. POOH w/Kutrite shoe & drill collars.
- RIH w/bit. Tag @4162'. RU stripper head & power swivel. Drill cement from 4162-4193'. Drill new formation from 4193-4260'. RD power swivel & stripper head. POOH w/bit & drill collars.

\*\*\*see attached sheet for additional data\*\*\*

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 09/24/2009  
 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 Larry W. Hill TITLE DISTRICT 1 SUPERVISOR DATE SEP 30 2009  
 CONDITIONS OF APPROVAL IF ANY.



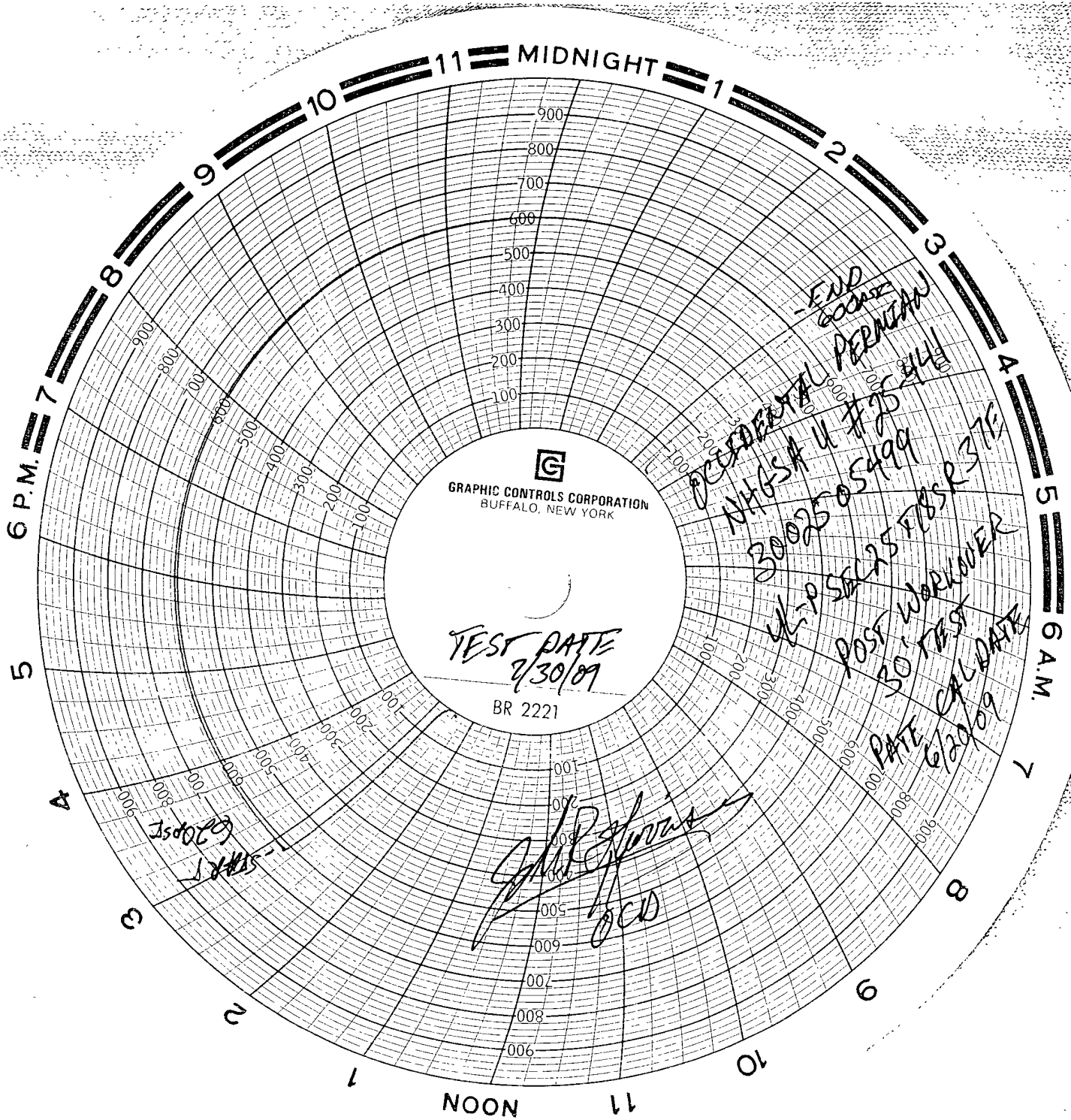
NHU 25-441

9. RIH w/treating packer set @4250. RU HES & pump 1084 gal of 15% NEFE acid in 2 stages of gelled brine. Flush w/25 bbl of 10# brine. RD HES. POOH w/treating packer.
10. RIH w/Arrow Set 1-X Dbl Grip packer on 125 jt of 2-7/8" Duoline tubing. Packer set @3964'.
11. ND BOP/NU wellhead.
12. Test casing to 600 PSI for 30 minutes and chart for the NMOCD. Robet Harrison w/NMOCD on site for test.
13. RDPU & RU. Clean location.

RUPU 07/21/09

RDPU 07/30/09





GRAPHIC CONTROLS CORPORATION  
BUFFALO, NEW YORK

TEST DATE  
7/30/09  
BR 2221

END  
OCCUPANCY  
PERMANENT  
NAGSA U #25  
3002505499  
U-P SA 25 FEB 83  
POST WORKOVER  
30 TEST  
DATE 6/20/09  
CAL DATE

*[Signature]*  
OCD

15000  
15000