State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 5-27-2004

District i 223 Nread for , Habby SM 8240 RECENCES South St. Francis D: Statu Fe, NM 8730 30.02337152 District H 101 W. Grad MA, Ancas, NM 8210 SEP 2.9 2009 31.02337 DISTRICT H 1000 Ro Brass Rd, Ane, NM 8740 HOBBSOCD 5.1.64448 (Spt 90 flem) North HobBSSOCD 6.300 (2537152 DISTRICT HI 1000 Ro Brass Rd, Ane, NM 8740 North HobBSSOCD North HobBSSOCA SUNDRN NOTCES AND REPORTS ON WELLS 7. Lase Name Off Agenema Name North HobBS (GSA) Unit Section 24 North HobBSSOCA Coordenal Perman IA Gas Well Other Injector 9.0000 No. 157984 Coordenal Perman IA Gas Well Other Injector 9.0000 No. 157984 Coordenal Perman IA Coordenal Perman IA Lase Conny Coordenal Perman IA Coordenal Perman IA Lase Conny 11 Elevation (State Reduce DF, RKX, RI GR, etc) 3000 Ros Researce Cong Ta 10. Pool name or Wildow 11 Elevation (State Reduce DF, RKX, RI GR, etc) 3000 Ros Researce Cong Ta 10. Pool name or Wildow 11 Elevation (State Reduce DF, RKX, RI GR, etc) 3000 Ros Researce Cong Ta 10. Pool name or Wildow 11 Elevation (State Reduce Researce Cong Take Researce	FILE IN TRIPLICATE	OIL CONSERVA	ATION DIVISION			
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 5. Fish blanking plug. 6. RIH w/bit. Tag @4341' PBTD. Circ well clean. POOH w/bit. 7. RU wireline and perforate hole @4324-30 @2 JSPF. RD wireline. 8. RIH w/SPA set @4335'. RU HES & perform acid job in 5 settings w/50 bbl of 15% NEFE acid. Flush w/25 bbl fresh water. RD HES. POOH w/SPA packer. 9. RIH w/dual packers set on 125 jts of 2-7/8" Duoline 20 tubing. Packers set @4139' (Arrow-set 1-X Dbl grip) & 4208' (KTC Hydraulic) ***see attached sheet for additional data*** 1 hereby certify that the information above is true and complete to the best of my knowledge and belef. 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						
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For State Use Only APPROVED BY UNIT IN DISTRICT 1 SUPERVISOR DATE SEP 3 0 2009	SIGNATURE Mendy	TIGUMMON	TITLE Administrative	Associate DAT	те <u>09/24/2009</u>	
APPROVED BY COMPANY AND APPROVED BY DISTRICT 1 SUPERVISOR DATE		nson () E-mail address:	mendy_johnson@oxy.com	TELEPHONE NO	806-592-6280	
		u) I.a	UISTRICT 1	SUPERVISOR		
	CONDITIONS OF APPROVAL IF ANY:		IIILE	DA		

NHU 24-622

10. ND BOP/NU wellhead.

11. Test casing to 500 PSI for 30 minutes and chart for the NMOCD. Robert Harrison w/NMOCD on site for test.

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12. RDPU & RU. Clean location.

2

RUPU 08/14/09 RDPU 08/20/09

