

# RECEIVED

State of New Mexico  
Energy, Minerals and Natural Resources Department

APR 08 2010

Form C-103  
Revised 5-27-2004

FILE IN TRIPLICATE

## OIL CONSERVATION DIVISION

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

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

WELL API NO  
30-025-37102 ✓

5. Indicate Type of Lease  
STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

North Hobbs (G/SA) Unit  
Section 30 ✓

8. Well No. 617

9. OGRID No. 157984 ✓

10. Pool name or Wildcat Hobbs (G/SA) ✓

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 )			
1. Type of Well. Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input checked="" type="checkbox"/>			
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>D</u> : <u>900</u> Feet From The <u>North</u> <u>863</u> Feet From The <u>West</u> Line Section <u>30</u> Township <u>18-S</u> Range <u>38-E</u> NMPM <u>Lea</u> County ✓			
11. Elevation (Show whether DF, RKB, RT GR, etc ) 3658' GR			
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: <u>Clean out/Perforate/acid treat</u>	<input checked="" type="checkbox"/>	OTHER: _____	<input 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.

- Kill well. POOH w/tubing & ESP equipment.
- Clean out to 4340'.
- Perforate hole @4140-50'. 4 JSPF
- Acid treat new perms w/3360 gal of 15% PAD acid.
- Acid treat existing perms w/60 bbl of 15% PAD acid and gelled rock salt block.
- Perform scale squeeze.
- RIH w/ESP & production equipment.
- Return well to production.

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 04/07/2010

TYPE OR PRINT NAME Mendy A. Johnson E-mail address: mendy\_johnson@oxy.com TELEPHONE NO. 806-592-6280

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APPROVED BY [Signature] TITLE PETROLEUM ENGINEER DATE APR 09 2010

CONDITIONS OF APPROVAL IF ANY: