State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 5-27-2004

FILE IN TRIPLICATE

RECEIVED
MAY 10 2010
HOBBSOCD

OIL CONSERVATION DIVISION

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

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. 30-025-12732

5. Indicate Type of Lease STATE [ ] FEE [X]

6. 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)

7. Lease Name or Unit Agreement Name: North Hobbs (G/SA) Unit Section 13

1. Type of Well: Oil Well [ ] Gas Well [ ] Other Injector

8. Well No. 441

2. Name of Operator: Occidental Permian Ltd.

9. OGRID No. 157984

3. Address of Operator: HCR 1 Box 90 Denver City, TX 79323

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

4. Well Location

Unit Letter P : 330 Feet From The South 330 Feet From The East Line

Section P Township 18-S Range 37-E NMPM Lea County

11. Elevation (*Show whether DF, RKB, RT GR, etc.*) 3665' GL

Pit or Below-grade Tank Application [ ] or Closure [ ]

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	[ ]	PLUG AND ABANDON	[ ]	REMEDIAL WORK	[ ]	ALTERING CASING	[ ]
TEMPORARILY ABANDON	[ ]	CHANGE PLANS	[ ]	COMMENCE DRILLING OPNS.	[ ]	PLUG & ABANDONMENT	[ ]
PULL OR ALTER CASING	[ ]	Multiple Completion	[ ]	CASING TEST AND CEMENT JOB	[ ]		
OTHER	Casing repair/Squeeze/Deepen/Acid Treat		[X]	OTHER:			[ ]

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.

1. Kill well. POOH w/injection equipment.
2. Clean out to 4200'.
3. Dump sand from 4254-4194'. Tag TOC @4194'
4. Set CIBP @4194'
5. Set CICR and pump cement squeeze.
6. Test squeeze.
7. Drill out CICR & cement.
8. Drill new formation from 4258-new TD @4345'.
9. Acid treat well w/1500 gal of 15% NEFE acid w/gelled rock salt block.
10. Perform scale squeeze.
11. Test casing and chart for the NMOCD.
12. Run back in hole with injection equipment and return well to injection.

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 05/05/2010

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 _____ TITLE STAFF MGR DATE 5-10-10

CONDITIONS OF APPROVAL IF ANY: