

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 5-27-2004

FILE IN TRIPLICATE

**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

**OIL CONSERVATION DIVISION**  
**RECEIVED**  
220 South St. Francis Dr.  
Santa Fe, NM 87505  
**JUN 10 2010**  
**HOBSOCD**

WELL API NO. 30-025-28887 ✓
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> ✓
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name North Hobbs (G/SA) Unit ✓ Section 31
8. Well No 422 ✓
9. OGRID No. 157984 ✓
10. Pool name or Wildcat Hobbs (G/SA) ✓

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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 Ctry, TX 79323	
4. Well Location Unit Letter <u>H</u> <u>2259</u> Feet From The <u>North</u> <u>600</u> Feet From The <u>East</u> Line <input checked="" type="checkbox"/> Section <u>31</u> Township <u>18-S</u> Range <u>38-E</u> NMPM <u>Lea</u> County <input checked="" type="checkbox"/>	
11. Elevation (Show whether DF, RKB, RT GR, etc.) 3637' GL	
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			
<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
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/Peforate/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

1. Kill well. POOH w/ESP equipment.
2. Clean out well to 4329'.
3. Perforate well at 4102-18'.
4. Acid treat w/3150 gal of 15% PAD acid.
5. Perform scale squeeze.
6. Run back in hole w/ESP equipment.
7. 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 06/09/2010  
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 [Signature] TITLE PETROLEUM ENGINEER DATE JUN 11 2010

CONDITIONS OF APPROVAL IF ANY:

*Jm.*