Form C-103 Revised 5-27-2004

FILE IN TRIPLICATE OIL CONSERVATION DIVISION	
DISTRICT 1 1220 South St. Francis Dr.	WELL API NO. 30-025-34907
1625 N. French Dr., Hobbs, NM 88240 DISTRICT II Santa Fe, NM 87505	
DISTRICT II	5. Indicate Type of Lease STATE FEE FEE
1301 W. Grand Ave, Artesia, M8821650CD DISTRICT III	6. State Oil & Gas Lease No.
DISTRICT III 1000 Rio Brazos Rd, Aztec, NM 87410	o, state on & das Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	North Hobbs (G/SA) Unit
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (Form C-101) for such proposals.)	Section 32
1. Type of Well. Oil Well X , Gas Well Other	8 Well No. 512
Oil Well X Gas Well Other 2 Name of Operator	9 OGRID No. 157984
Occidental Permian Ltd.	
3. Address of Operator	10. Pool name or Wildcat Hobbs (G/SA)
HCR 1 Box 90 Denver City, TX 79323	
4 Well Location	Farm The West Line
Well Location Unit Letter F 2164 Feet From The South 2054 Feet	From The West Line
Section 32 Township 18-S Range 38-E	NMPM Lea County
11. Elevation (Show whether DF, RKB, RT GR, etc.) 3631' 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 mıl Below-Grade Tank: Volume bbls; Construction Material	
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 OPN	NS. PLUG & ABANDONMENT
PULL OR ALTER CASING Multiple Completion CASING TEST AND CEMEN	TJOB
OTHER. Clean out/Perforate/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/ESP and equipment.	
 Clean out to 4250'. Perforate well @4060-75'. 	
4. Acid treat w/2940 gal of 15% PAD acid.	
5. Perform scale squeeze.	
6. RIH w/ESP equipment.	
7. Return well to production.	
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I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify to constructed or	that any pit or below-grade tank has been/will be
closed according to NMOCD guidelines , a general permit or an (attached) alternative	e OCD-approved
SIGNATURE Mendy Olympia 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	a engineer Jin 11 co
APPROVED BY TITLE	DATE JUN 1 1 2010

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