

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

FILE IN TRIPPLICATE

**OIL CONSERVATION DIVISION**

**DISTRICT I**  
P.O. Box 1980, Hobbs, NM 88240

2040 Pacheco St.  
Santa Fe, NM 87505

**DISTRICT II**  
811 S. 1st Street, Artesia, NM 88210

**DISTRICT III**  
1000 Rio Brazos Rd, Aztec, NM 87410

WELL API NO. 30-025-07492

5. Indicate Type of Lease  
FED ☐ STATE ☐ FEE ☒

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.)

1. Type of Well:

Oil Well ☒ Gas Well ☐ Other ☐

2. Name of Operator

Occidental Permian Ltd.

3. Address of Operator

1017 W. Stanolind Rd., HOBBS, NM 88240 505/397-8200

4. Well Location

Unit Letter G : 2200 Feet From The NORTH Line and 2310 Feet From The EAST Line  
Section 31 Township 18S Range 38E NMPM LEA County

7. Lease Name or Unit Agreement Name

NORTH HOBBS (G/SA) UNIT

8. Well No. 321

9. Pool name or Wildcat HOBBS (G/SA)

10. Elevation (Show whether DF, RKB, RT GR, etc.)

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

**NOTICE OF INTENTION TO:**

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐  
OTHER: Sqz Grayburg, Plug off lower San Andres ☒

**SUBSEQUENT REPORT OF:**

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG & ABANDONMENT ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER: ☐

12. 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.

1. PULL PRODUCTION EQUIPMENT.
2. SQUEEZE GRAYBURG AND UPPER SAN ANDRES PERFS.
3. ACID TREAT AND RETURN TO PRODUCTION.



I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE

*D. Nelson*

TITLE

PROD ENGR

DATE

2-5-04

TYPE OR PRINT NAME

D. NELSON

TELEPHONE NO.

505/397-8200

(This space for State Use)

APPROVED BY

*Harry W. Wink*

TITLE

OC FIELD REPRESENTATIVE II/STAFF MANAGER

FEB 12 2004

CONDITIONS OF APPROVAL IF ANY: