

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 5-27-2004

FILE IN TRIPLICATE

OIL CONSERVATION DIVISION

DISTRICT I
1625 N. French Dr., Hobbs, NM 88240

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

DISTRICT II
1301 W. Grand Ave, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd, Aztec, NM 87410

RECEIVED

AUG 23 2010

HOBBSOCD

WELL API NO. 30-025-29098
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name North Hobbs (G/SA) Unit Section 24
8. Well No. 442
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 type="checkbox"/> Gas Well <input type="checkbox"/> Other <input checked="" type="checkbox"/> Injector	7. Lease Name or Unit Agreement Name North Hobbs (G/SA) Unit Section 24
2. Name of Operator Occidental Permian Ltd.	8. Well No. 442
3. Address of Operator HCR 1 Box 90 Denver City, TX 79323	9. OGRID No 157984
4. Well Location Unit Letter P : 1260 Feet From The South 200 Feet From The East Line Section 24 Township 18-S Range 37-E NMPM Lea County	10. Pool name or Wildcat Hobbs (G/SA)
11. Elevation (Show whether DF, RKB, RT GR, etc.) 3662' 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	
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: _____	OTHER: Clean out/Acid Treat <input checked="" type="checkbox"/>

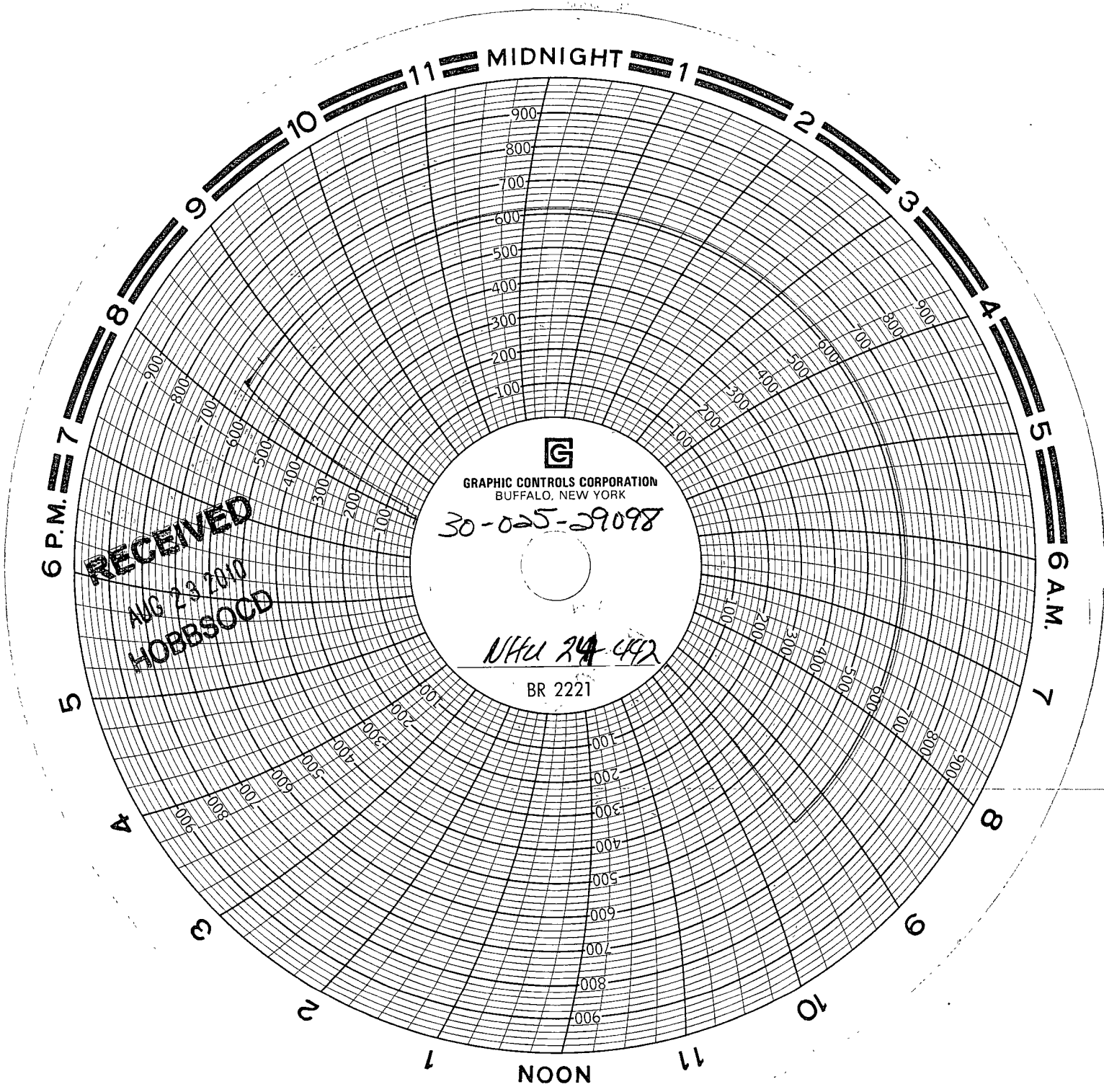
13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.
1. RUPU & RU.
 2. ND wellhead/NU BOP.
 3. POOH w/tubing and injection equipment.
 4. RIH w/bit. Tag @4285'. NU stripperhead and power swivel. Clean out iron sulfide & returns from 4285-4306'. POOH w/bit.
 5. RIH w/treating packer. RU HES and acidize perms 4268-4236' w/2525 gal of 15% NEFE acid. RD HES. POOH w/treating packer.
 6. RIH w/dual injection packers set on 125 jts of 2-7/8" tubing. Arrowset 1-X Dbl grip packer set @3874'. KTC Hydraulic Tandem packer set @4191'.
 7. ND BOP/NU new CPROX wellhead.
 8. Test casing to 615 PSI for 30 minutes and chart for the NMOCD.
 9. RDPU & RU. Clean location and return well to injection.

RUPU 07/12/2010 RDPU 07/22/2010

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 08/18/2010
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 STAFF MGR DATE 8-23-10
CONDITIONS OF APPROVAL IF ANY: 3. m



GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK

30-025-29098

NH 24 442

BR 2221

RECEIVED

AUG 23 2010

HOBBSOCD

7-22-10
NHSAU 24-442

API# 30-025-29098
SEC. 24, T-18-S, R-37-E, UL'P'
HOBBS GSA FIELD
LEA COUNTY, NM

CHART RECORDER
CLIF MOCK

S.N. MFG 3219
CALIB DATE - 7/21/10

BS