

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

RECEIVED
SEP 28 2010
HOBBSUCD
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

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| WELL API NO 30-025-37105 |
| 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 25 |
| 8 Well No 642 |
| 9 OGRID No 157984 |
| 10 Pool name or Wildcat Hobbs (G/SA) |

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| <p align="center">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)</p> | |
| 1 Type of Well Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/> | |
| 2 Name of Operator Occidental Permian Ltd. | |
| 3 Address of Operator HCR 1 Box 90 Denver City, TX 79323 | |
| 4. Well Location Unit Letter <u>I</u> <u>1645</u> Feet From The <u>South</u> <u>465</u> Feet From The <u>East</u> Line Section <u>25</u> Township <u>18-S</u> Range <u>34-E</u> NMPM Lea County | |
| 11 Elevation (Show whether DF, RKB, RT GR, etc) 3657' 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

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| <p>NOTICE OF INTENTION TO:</p> <p>PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/></p> <p>TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/></p> <p>PULL OR ALTER CASING <input type="checkbox"/> Multiple Completion <input type="checkbox"/></p> <p>OTHER: <u>Clean out/Perforate/Acid Treat</u> <input checked="" type="checkbox"/></p> | <p>SUBSEQUENT REPORT OF:</p> <p>REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/></p> <p>COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG & ABANDONMENT <input type="checkbox"/></p> <p>CASING TEST AND CEMENT JOB <input type="checkbox"/></p> <p>OTHER: _____ <input type="checkbox"/></p> |
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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 to PBTD @4373'.
3. Perforate well.
4. Acid treat w/2950 gal of 15% NEFE acid.
5. Perform scale squeeze.
6. RIH 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 09/27/2010

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 OCT 01 2010

CONDITIONS OF APPROVAL IF ANY

Handwritten mark