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State of New Mexico
Energy, Minerals and Natural Resources DepartmentForm C-103
Revised 5-27-2004

FILE IN TRIPLICATE

JAN 07 2011

OIL CONSERVATION DIVISION

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

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

WELL API NO. 30-025-07624
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 South Hobbs (G/SA) Unit
8. Well No. 13
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	2. Name of Operator Occidental Permian Ltd.
3. Address of Operator HCR 1 Box 90 Denver City, TX 79323	4. Well Location Unit Letter C : 330 Feet From The North 2310 Feet From The West Line Section 5 Township 19-S Range 38-E NMPM Lea County
11. Elevation (Show whether DF, RKB, RT GR, etc.) 3628' DF	
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: Clean out/Acid treat <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/injection equipment.
2. Clean out to TD @4243'
3. Acid treat well w/2350 gal of 15% NEFE acid.
4. Perform scale squeeze.
5. Run back in hole w/injection equipment.
6. Test casing and chart for the NMOCD.
7. Return well to injection.

The Oil Conservation Division **Must be notified**
24 hours prior to the beginning of plugging operationsPer Underground Injection Control Program Manual
11.6.C Packer shall be set within or less than 100 feet of the uppermost injection perfs or open hole.

of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be

nit ☐ or an (attached) alternative OCD-approved plan ☐

SIGNATURE Mendy A. Johnson TITLE Administrative Associate DATE 01/05/2011
 TYPE OR PRINT NAME Mendy A. Johnson E-mail address: mendy_johnson@oxv.com TELEPHONE NO. 806-592-6280

For State Use Only

APPROVED BY [Signature] TITLE Staff Mgr DATE 1-10-2011
 CONDITIONS OF APPROVAL IF ANY: _____