

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I

1625 N. French Drive, Hobbs, NM 88240

OIL CONSERVATION DIVISION

310 Old Santa Fe Trail, Room 206
Santa Fe, New Mexico 87503

WELL API NO. 3002505477

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.

7. Lease Name or Unit Agreement Name
NORTH HOBBS (G/SA) UNIT

SECTION 24

8. Well No. 111

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

4. Well Location

Unit Letter D 330 Feet From The NORTH Line and 990 Feet From The WEST Line
Section 24 Township 18-S 37-E NMPM LEA County

10. Elevation (Show whether DF, RKB, RT GR, etc.)
3673' GL

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: ☐

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.

POOH W/PRODUCTION EQUIPMENT. LAYING DOWN ESP EQUIPMENT.

RIH W/5.5" CSG SCRAPER TO 4000'. *** 15.5# CSG

*** TOP OF 5.5" LINER @ 3942'.

SET 5.5" CIBP @3990'. TOP PERF @4014'.

TEST CSG TO 500 PSI FOR 30 MIN AND CHART FOR THE NMOCD. **** NOTIFY NMOCD 24 HRS BEFORE CSG TEST.

CIRC CSG WITH INHIBITED FLUID.

POOH LAYING DOWN TBG.

RDPU AND CLEAN LOCATION.

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

SIGNATURE _____ TITLE COMPLETION SPECIALIST DATE 10/03/2000
TYPE OR PRINT NAME R.N. GILBERT TELEPHONE NO. 505/397-8206

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE OCT 6 2000
CONDITIONS OF APPROVAL IF ANY: