

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

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

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

OIL CONSERVATION DIVISION

2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO. 30-025-07388
Indicate Type of Lease STATE ☐ FEE ☒
State Oil & Gas Lease No.
Lease Name or Unit Agreement Name North Hobbs G. S/A Unit
Well No. 421
Pool name or Wildcat Hobbs; G. S/A

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.)	
Type of Well: OIL WELL ☒ GAS WELL ☐ OTHER	
Name of Operator Occidental Permain	
Address of Operator 1710 W Stanolind Rd. Hobbs, NM 88240	
Well Location Unit Letter <u>H</u> : <u>2310</u> Feet From The <u>North</u> Line and <u>990</u> Feet From The <u>East</u> Line Section <u>20</u> Township <u>18S</u> Range <u>38E</u> NMPM Lea County	
Elevation (Show whether DF, RKB, RT, GR, etc.)	

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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 AND ANBANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: ☐

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.

Notify NMOCDD before rig up

Well TAD W/ CIBP set @ 4100' on 12-92

Tag CIBP Circ. wellbore W/ M.L.F.
Spot 25 sks of cement @ 4100'
Perf @ 2810' Squeeze 35 sks of cement WOC & Tag (Bottom of salt)
Perf @ 2000' Squeeze 35 sks of cement WOC & Tag (Top of Salt)
Perf @ 355' Circ cement down 5 1/2 up annulus to surface.

Cut of wellhead & anchors 4' BGL. Cap well W/ steel plate. Due to well in township, weld information on plate 4' BGL

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

SIGNATURE _____ TITLE Agent DATE 12-11-00

TYPE OR PRINT NAME Jack Shelton TELEPHONE NO. 915-523-5155

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL IF ANY:

DEC 15 2000
dp

SECTION 20 - UNIT 171 NO. 40 W

PLETION DATE 5/12/52

C.H. SWEET McKINLEY B NO. 2

COMPLETION INTERNAL: 4252-4256 (T)

RECOMPLETION DATE

HOBBS (G-SA) UNIT

LOCATION 2310' FNL & 990' FEL SECTION 20 H BLOCK 1

SURVEY T-18-S, R-38-E COUNTY Lea County, N.M.

DATUM 3654' [GL] G.L. ELEV. _____ TD 4414' PBTD _____ []

[illegible]