

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.	30-025-07499
5. Indicate Type of Lease	FED <input type="checkbox"/> STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name	NORTH HOBBS (G/SA) UNIT
Section	31
8. Well No.	331
9. 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 Temporary Abandoned
2. Name of Operator	OCCIDENTAL PERMIAN LTD.
3. Address of Operator	1017 W STANOLIND RD.
4. Well Location	Unit Letter <u>J</u> <u>2200</u> Feet From The <u>SOUTH</u> Line and <u>2310</u> Feet From The <u>EAST</u> Line Section <u>31</u> Township <u>18-S</u> <u>38-E</u> NMPM LEA County
10. Elevation (Show whether DF, RKB, RT GR, etc.)	3642' GR

11. 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"/>	REMEDIAL WORK <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG & ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER: <input type="checkbox"/>	OTHER: <u>CASING PRESSURE TEST</u> <input checked="" type="checkbox"/>

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.

Test Date: 4/26/2001

Pressure Reading: Initial - 540 psi, 15 min - 540, 30 min - 540 psi.

Length of pressure test 30 minutes.

*TA approved till
5/22/2006*

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

SIGNATURE	TITLE	DATE
Steve W. Jones	Engineering Tech.	5/22/01
TYPE OR PRINT NAME		TELEPHONE NO.
		505/397-8228

(This space for State Use)

APPROVED BY	TITLE	DATE
CONDITIONS OF APPROVAL IF ANY:		

5
C
16