

DISTRICT I

1625 N. FRENCH DRIVE, HOBBS, NM 88240

OIL CONSERVATION DIVISION

310 Old Santa Fe Trail, Room 206
Santa Fe, New Mexico 87503WELL API NO.
30-025-07575

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 TAd - 6/11/98

2. Name of Operator

OCCIDENTAL PERMIAN LTD.

3. Address of Operator

1017 W. STANOLIND RD.

7. Lease Name or Unit Agreement Name

SOUTH HOBBS (G/SA) UNIT

8. Well No.

1

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

4. Well Location

Unit Letter D : 660 Feet From The NORTH Line and 660 Feet From The WEST LineSection 34Township 18-SRANGE 38-E

NMPM

LEA County

10. Elevation (Show whether DF, RKB, RTGR, etc.)

3640' DF

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: MIT AFTER MIT FAILURE! ☒

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.

Failed MIT in April, 2001.

Maclaskey Oil Field Services pressured up on it 7/30/01 and found no leaks. We think that the first pressure truck had problems.

2nd TEST DATE: 07/30/01

PRESSURE READING: Initial - 560 psi, 15 min - 560 psi, 30 min - 560 psi

Length of pressure test: 30 minutes

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

SIGNATURE

Steve W Jones

TITLE

Engineering Tech

DATE

10/31/01

TYPE OR PRINT NAME

Steve W. Jones

TELEPHONE
NO.

505-397-8228

(This space for State Use)

APPROVED BY

TITLE

ORIGINAL SIGNED BY

DATE

NOV 06 2001

CONDITIONS OF APPROVAL IF ANY:

GARY W. WINK

NATURAL SCIENCE MANAGER - 2