## State of New Mexico Energy, Minerals and Natural Resources Department

DISTRICT I	OIL CONSERVA	ATION DIVISION				
1625 N. French Drive , Hobbs, NM 88240	310 Old Santa Fe Trail, Room 206 Santa Fe, New Mexico 87503		WELL API NO. 30-025-12732			
			5. Indicate Type of		X FEE	
			6. State Oil & Gas		X FEE	
					····	
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.	LS TO DRILL OR TO DEEPE USE "APPLICATION FOR P. FOR SUCH PROPOSALS.)	N OR PLUG BACK TO A ERMIT"	7. Lease Name or NORTH HOBBS	Unit Agreeme S (G/SA) U.	ent Name NIT	
1. Type of Well:			SECTION 13			
Oil Well   X   Gas Well   Other			0 W/ II W			
2. Name of Operator OCCIDENTAL F	ERMIAN, LTD.		8. Well No.	<b>4</b> 41		
3. Address of Operator 1017 W STANOI	LIND RD.		9. Pool name or W HOBBS (G/SA)	'ildcat	-	
4. Well Location						
Unit Letter P : 330 Fee	t From The COLUMN	Line and 220 E				
Unit Letter P : 330 Fee	t From The SOUTH	Line and 330 Fe	et From The E.	AST1	Line	
Section 13	Township 18-S	Range 37-	E NMPM		LEA Count	у
	Elevation (Show whether DF, 2011) GL	RKB, RT GR, etc.)				
	opriate Box to Indicate N	Vature of Notice, Report.	or Other Data			
NOTICE OF INTENTIC			SEQUENT REPO	ORT OF:		
	G AND NDON	REMEDIAL WORK	A A	ALTERING C.	ASING	
TEMPORARILY ABANDON CHAI	NGE PLANS	COMMENCE DRILLING O	PNS.	PLUG & ABA	NDONMENT	
PULL OR ALTER CASING	<del></del>	CASING TEST AND CEME				L
OTHER:		OTHER: Temp	orary Abandon Wel	1		X
12. Describe Proposed or Completed Operations (Completed Operations)	learly state all pertinent details				v proposed	
work) SEE RULE 1103.			9	-J <b>J</b>	, p. op 0.020	
RUPU. POH w/tbg. RIH w/7" csg scraper to 3810'. RIH w/7" CIPB and set @3800'. Top of 5.5" liner @3844'. Top perf @4000" Cicr csg w/pkr fluid. Test csg to 570 psi for 30 min and chart for the RDPU. Clean Location.	e NMOCD.		1			
Rig Up Date: 01/09/2002		/			ng).	
Rig Down Date: 01/11/2002				154 3		
				2	e Till Jegis	
	This Approval o Abandonment Exp	f Temporary //Z	2/07	See	* Cli	
I hereby certify that the information above is true an	d complete to the best of mv kr	wledge and belief.				
D1 + 3	10 +	\				
SIGNATURE A SUM SIGNATURE	ww	TITLE Completions S <sub>I</sub>		DATE _	01/15/2002	
TYPE OR PRINT NAME R.N. GILBERT			TELEPH NO.	ONE.	505/397-8206	1
(This space for State Use)						
APPROVED BY	TITLE		DAT	JAN	2 4 2002	
CONDITIONS OF APPROVAL IF ANY:	IIIDD		DA1			

1. 4

DISTRICT I

