

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. <u>23719</u> 30-025- <u>0000</u>
5. Indicate Type of Lease FED <input type="checkbox"/> STATE <input checked="" type="checkbox"/> FREE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name NORTH HOBBS (G/SA) UNIT
SECTION <u>29</u>
8. Well No. <u>111</u>
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 checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator OCCIDENTAL PERMIAN LIMITED PARTNERSHIP	
3. Address of Operator 1017 W STANOLIND RD.	
4. Well Location Unit Letter <u>D</u> : <u>990</u> Feet From The <u>NORTH</u> Line and <u>330</u> Feet From The <u>WEST</u> Line Section <u>29</u> Township <u>18-S</u> Range <u>38-E</u> NMPM <u>11A</u> County	
10. Elevation (Show whether DF, RKB, RT GR, etc.) 3650' GL.	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER: <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG & ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER: <u>TEMPORARY ABANDON</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.

Rig up Pulling Unit (04/24/00).
POOH w/Production equipment.
Set 7" CIBP to 3850'.
Test csg to 520# for 30 min and chart for the NMOCD.
Circ csg with inhibited fluid.
Rig Down and Clean Location

Rig Up Date: (04/24/00)
Rig Down Date: (04/25/00)

This Approval of Temporary
Abandonment Expires

6/27/2005

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

SIGNATURE Robert N. Gilbert TITLE LIFT SPECIALIST DATE 06/01/00
TYPE OR PRINT NAME R.N. GILBERT TELEPHONE NO. 505/397-8206

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

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