

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

FILE IN TRIPLICATE

OIL CONSERVATION DIVISION

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

2040 Pacheco St.
Santa Fe, NM 87505

DISTRICT II
811 S. 1st Street, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd, Aztec, NM 87410

WELL API NO.	30-025-26832
5. Indicate Type of Lease	FED <input type="checkbox"/> STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name	NORTH HOBBS (G/SA) UNIT
Section 24	
8. Well No.	242
9. Pool name or Wildcat	HOBBS (G/SA)
10. Elevation (Show whether DF, RKB, RT GR, etc.)	

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 INJECTOR
2. Name of Operator	Occidental Permian Ltd.
3. Address of Operator	1017 W. Stanolind Rd., HOBBS, NM 88240 505/397-8200
4. Well Location	Unit Letter <u>N</u> : <u>1300</u> Feet From The <u>SOUTH</u> Line and <u>2600</u> Feet From The <u>WEST</u> Line Section <u>24</u> Township <u>18S</u> Range <u>37E</u> NMPM LEA County
10. Elevation (Show whether DF, RKB, RT GR, etc.)	

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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <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>Open Additional Pay in San Andres</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.

1. Pull injection equipment.
2. Perforate the Upper San Andres Zone from 4140'-4240'.
3. Stimulate new perms w/1000 g NEFE HCL Acid.
4. Set 5.5" Guiberson UNI VI pkr @4096.
5. Circ csg w/pkr fluid. Test csg to 540 psi for 30 min and chart for the NMOCD.
6. NU Wellhead. RDPU. Clean Location.

Well returned to injection 06/07/2002
Bottom of tbg @4096'.

Rig up Date: 05/30/2002	Rig Up Date: 06/04/2002	Rig Up Date: 06/06/2002
Rig Down Date: 05/31/2002	Rig Down Date: 06/05/2002	Rig Down Date: 06/07/2002

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

SIGNATURE <u>Robert Gilbert</u>	TITLE <u>SR. ENGR TECH</u>	DATE <u>06/27/2002</u>
TYPE OR PRINT NAME <u>ROBERT GILBERT</u>	TELEPHONE NO. <u>505/397-8206</u>	

(This space for State Use)

APPROVED BY _____ DATE _____
CONDITIONS OF APPROVAL IF ANY: _____
ORIGINAL SIGNED BY _____
GARY W. WINK
OC FIELD REPRESENTATIVE II/STAFF MANAGER

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