

FILE IN TRIPLICATE

OIL CONSERVATION DIVISION

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

2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO. 30-025-26934

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

5. Indicate Type of Lease
FED STATE FEE

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

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.)

7. Lease Name or Unit Agreement Name
NORTH HOBBS (G/SA) UNIT

1. Type of Well:
Oil Well Gas Well Other Injector

8. Well No. 222

2. Name of Operator
Oxy Permian LTD.

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

3. Address of Operator
1017 W. Stanolind Rd., HOBBS, NM 88240 505/397-8200

4. Well Location
Unit Letter F : 1370 Feet From The NORTH Line and 1850 Feet From The WEST Line
Section 29 Township 18S Range 38E NMPM LEA County

10. Elevation (Show whether DF, RKB, RT GR, etc.)
3643 GL

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"/> |
| TEMPORARILY ABANDON <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/> | COMMENCE DRILLING OPNS. <input type="checkbox"/> |
| OTHER: <u>Open Upper San Andres</u> <input checked="" type="checkbox"/> | PLUG & ABANDONMENT <input type="checkbox"/> |
| | CASING TEST AND CEMENT JOB <input type="checkbox"/> |
| | OTHER: _____ <input 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

- Pull injection equipment
- Set CIBP at ±4215
- Perforate San Andres and acid stimulate.
- Run injection equipment and circulate packer fluid.
- Notify NMOCD of packer test



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

SIGNATURE [Signature] TITLE PROD ENGR DATE 4-29-02
 TYPE OR PRINT NAME D. NELSON TELEPHONE NO. 505/397-8200

(This space for State Use)

APPROVED BY _____ TITLE ORIGINAL SIGNED BY DATE APR 23 2002
 CONDITIONS OF APPROVAL IF ANY: PAUL F. KAUFZ
PETROLEUM ENGINEER

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