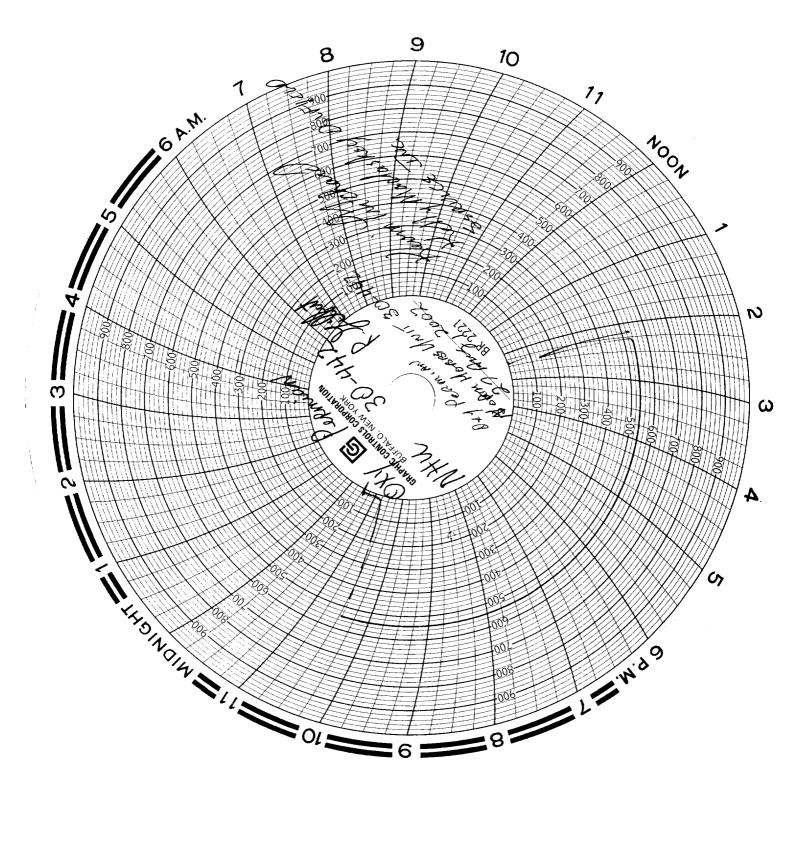
State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

FILE IN TRIPLICATE	OII CONSEDV	ATION DIVISION	Revised 1-1-89			
DISTRICT I	OIL CONSERVATION DIVISION 2040 Pacheco St. Santa Fe, NM 87505		WELL API NO.			
P.O. Box 1980, Hobbs, NM 88240			30-025-27001			
DISTRICT II	Barra 1 C,	, 11111 01505	5. Indicate Type of Lease			
811 S. 1st Street, Artesia, NM 88210			FED X STATE FEE			
<u>DISTRICT III</u>			6. State Oil & Gas Lease No.			
1000 Rio Brazos Rd, Aztec, NM 87410						
SUNDRY NO	TICES AND REPORTS ON WE	ELLS				
(DO NOT USE THIS FORM FOR PR	OPOSALS TO DRILL OR TO DEEPEN	OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name			
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101 FOR SUCH PROPOSALS.)			NORTH HOBBS (G/SA) UNIT			
1. Type of Well: Oil Well	Gas Well Other It	njector	Section 30			
2. Name of Operator			8. Well No. 442			
Oxy Permian LTD.						
3. Address of Operator			9. Pool name or Wildcat HOBBS (G/SA)			
1017 W. Stanolind Rd., HOBBS,	NM 88240 505/3	97-8200				
4. Well Location						
Unit Letter P : 1300	Feet From The SOUTH	Line and 1050 Fe	et From The EAST Line			
Section 30	Township 18S	Range 381	NMPM LEA County			
	10. Elevation (Show whether DF, R 3643 GL	KB, RT GR, etc.)				
11. Checi	k Appropriate Box to Indicate Na			<u>uuu</u>		
NOTICE OF INT	ENTION TO:	SUB	SEQUENT REPORT OF:			
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING			
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING OF	PNS. PLUG & ABANDONMENT			
PULL OR ALTER CASING		CASING TEST AND CEME	NT JOB			
OTHER:				X		
		Squeez		$\stackrel{\cdot}{=}$		
12. Describe Proposed or Completed Operation SEE RULE 1103.	ns (Clearly state all pertinent details, an	nd give pertinent dates, including	estimated date of starting any proposed work)			
Pull injection equipment.						
2. Set CIBP at ±4085.						
3. Squeeze upper San Andres (4048	-76) w/200 sxs cmt.					
4. RIH w/5.5" Guiberson G-6 pkr or						
5. Pkr set @4013'. Top perf @4090	··					
6. Bottom of tbg @4013'.						
7. Circ csg w/pkr fluid. Test csg to 5	40 psi for 30 min and chart for the	e NMOCD.				
Well returnued to injection 08/28/200	2.					
Rig Up Date: 08/20/2002						
Rig Down Date: 08/27/2002						
5 · · · · · · · · · · · · · · · · ·						
I hereby certify that the information above is	rue and complete to the best of my know	ledge and belief.				
SIGNATURE Kolut	Fillrit	TITLE SR ENGR TE	CH DATE 08/29/2002			
TYPE OR PRINT NAME ROBERT G	LBERT		TELEPHONE NO. 505/397-8206			
(This space for State Use)						
A DDD OVED DV		TITLE	DATE			

CONDITIONS OF APPROVAL IF ANY:

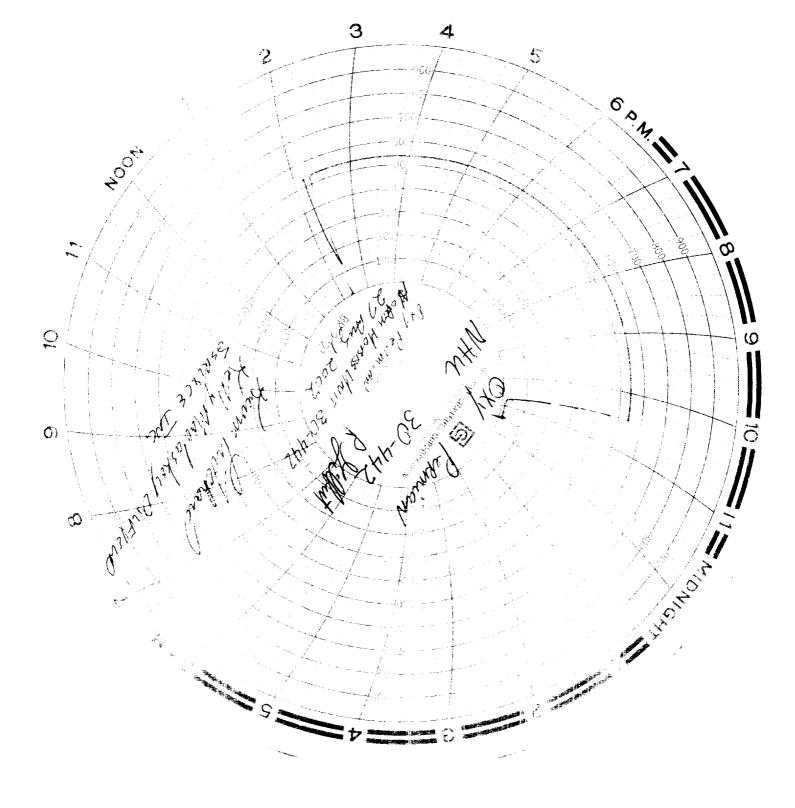


State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

FILE IN TRIPLICATE	OIL CONSERVA	ATION DIVISION				
<u>DISTRICT I</u>	2040 Pacheco St. Santa Fe, NM 87505		WELL API NO.			
P.O. Box 1980, Hobbs, NM 88240			30-025-27001			
<u>DISTRICT II</u>			5. Indicate Type of Lease	-, l		
811 S. 1st Street, Artesia, NM 88210			FED X STATE FEE	4		
DISTRICT III			6. State Oil & Gas Lease No.	-		
1000 Rio Brazos Rd, Aztec, NM 87410						
	TICES AND REPORTS ON WEI					
(DO NOT USE THIS FORM FOR P	ROPOSALS TO DRILL OR TO DEEPEN (ERVOIR. USE "APPLICATION FOR PER	OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name			
	A C-101 FOR SUCH PROPOSALS.)	KIVIII	NORTH HOBBS (G/SA) UNIT			
Type of Well:			<u> </u>			
Oil Well	Gas Well Other Inj	ector	Section 30			
2. Name of Operator			8. Well No. 442			
Oxy Permian LTD.			A D I WILL HOPPS (C/S)			
3. Address of Operator	505/20	7.0300	9. Pool name or Wildcat HOBBS (G/SA	A)		
1017 W. Stanolind Rd., HOBBS,	NM 88240 505/39	/-8200				
4. Well Location		Linear 1050 For	et From The EAST Line			
Unit Letter P : 1300	Feet From The SOUTH	Line and 1050 Fee	et From The EAST Line			
Section 30	Township 18S	Range 38E	NMPM LEA County	y		
	10. Elevation (Show whether DF, RK	(B, RT GR, etc.)				
	3643 GL					
	ck Appropriate Box to Indicate Na	ture of Notice, Report, or	Other Data			
NOTICE OF IN	TENTION TO:	SUB	SEQUENT REPORT OF:			
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING			
TTI POOR ARMY ARANGON	CHANGE PLANS	COMMENCE DRILLING OF	NS. PLUG & ABANDONMENT			
TEMPORARILY ABANDON I I	CHANGE LANG I I	COMMENCE DIVIETING OF	110:			
TEMPORARILY ABANDON	CHANGETEANS					
PULL OR ALTER CASING	CHANGETEANS	CASING TEST AND CEMEI	NT JOB			
PULL OR ALTER CASING OTHER:		CASING TEST AND CEMEIOTHER: Squeez	NT JOB	X		
PULL OR ALTER CASING OTHER: 12. Describe Proposed or Completed Operation		CASING TEST AND CEMEIOTHER: Squeez	NT JOB	X		
PULL OR ALTER CASING OTHER:		CASING TEST AND CEMEIOTHER: Squeez	NT JOB	X		
PULL OR ALTER CASING OTHER: 12. Describe Proposed or Completed Operat SEE RULE 1103.		CASING TEST AND CEMEIOTHER: Squeez	NT JOB	X		
PULL OR ALTER CASING OTHER: 12. Describe Proposed or Completed Operat SEE RULE 1103. 1. Pull injection equipment.		CASING TEST AND CEMEIOTHER: Squeez	NT JOB	X		
PULL OR ALTER CASING OTHER: 12. Describe Proposed or Completed Operat SEE RULE 1103. 1. Pull injection equipment. 2. Set CIBP at ±4085. 3. Squeeze upper San Andres (404)	ions (Clearly state all pertinent details, an 8-76) w/200 sxs cmt.	CASING TEST AND CEMEIOTHER: Squeez	NT JOB	X		
PULL OR ALTER CASING OTHER: 12. Describe Proposed or Completed Operat SEE RULE 1103. 1. Pull injection equipment. 2. Set CIBP at ±4085. 3. Squeeze upper San Andres (4044). 4. RIH w/5.5" Guiberson G-6 pkr	ions (Clearly state all pertinent details, an 8-76) w/200 sxs cmt. on 130 jts 2-7/8" Duoline tbg.	CASING TEST AND CEMEIOTHER: Squeez	NT JOB	X		
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CONDITIONS OF APPROVAL IF ANY:



State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

FILE IN TRIPLICATE	OIL CON	SERVA'	TION D	IVISION				
DISTRICT I		2040 Pacheco St.		WELL API NO. 30-025-27001				
<u> </u>		Santa Fe, N	NM 87505		30-025-27001 5. Indicate Type of Lease			
<u>DISTRICT II</u>					5. Indicate Type	_	FEE	¬
811 S. 1st Street, Artesia, NM	88210				6. State Oil & G	1	TEE	4
<u>DISTRICT III</u>					U. State U.I & U	ids Lease .10.		
1000 Rio Brazos Rd, Aztec, N.		ON WELL	18					
	NDRY NOTICES AND REPORTS			CK TO A	7 Lease Name	or Unit Agreement	//////////////////////////////////////	
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"								
Dirt	(FORM C-101 FOR SUCH PROPOSA	ALS.)			NORTH HOE	BBS (G/SA) UN	IT	
Type of Well: Oil We	II Gas Well	Other Inje	ector		Section 30			
2. Name of Operator					8. Well No.	442		
Oxy Permian LTD.				· · · · · · · · · · · · · · · · · · ·	9. Pool name or	Wildcat I	HOBBS (G/SA	
3. Address of Operator	d., HOBBS, NM 88240	505/397	-8200				<u> </u>	
4. Well Location	a., 110000, 1101 00010							
Unit Letter P	: 1300 Feet From The SO	UTH L	_ine and	1050 Fee	et From The	EI (O)	Line	
Section 3		18S		lange 38E	NMP	M Sananananan	LEA County	
	10. Elevation (Show whe	ther DF, RKI	B, RT GR, etc.)				
	3643 GL Check Appropriate Box to In	dicate Nati	ure of Notic	ce Report or	Other Data			
11.	Check Appropriate Box to In DE OF INTENTION TO:	uicaie Nati	uie di Notti	SUB	SEQUENT R	EPORT OF:		
		\	REMEDIAL		<u> </u>	ALTERING CA	ASING	
PERFORM REMEDIAL WO				E DRILLING OF	PNS [PLUG & ABA		$\overline{\Box}$
TEMPORARILY ABANDON	CHANGE PLANS					, 200 a / lb/		
PULL OR ALTER CASING		,		ST AND CEME		. 1		X
OTHER:			OTHER:		ze Upper San A			
12. Describe Proposed or Con SEE RULE 1103.	npleted Operations (Clearly state all pertinen	nt details, and	l give pertiner	nt dates, including	estimated date of s	starting any propos	sed work)	
1. Pull injection equip	ment.							
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5. Pkr set @4013'. To6. Bottom of tbg @40	p per (@4090 . 13'							
6. Bottom of the @40 7. Circ csg w/pkr fluid	. Test csg to 540 psi for 30 min and ch	nart for the	NMOCD.					
Well returnued to injecti								
Die Lie Dote: 09/2/)/2002							
	7/2002							
1115 50 1111 54101 00/2								
		f 1 1	ladge and heli	of				
I hereby certify that the infor	mation above is true and complete to the best	. or my knowi	ieuge anu beni				00/00/2005	
SIGNATURE	Kolut Fellen		_ TITLE	SR ENGR TE		DATE	08/29/2002	
TYPE OR PRINT NAME	ROBERT GILBERT				TE	ELEPHONE NO.	505/397-820	6
(This space for State Use)								
APPROVED BY			TITLE			DATE		

CONDITIONS OF APPROVAL IF ANY:

