

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. 30-025-28944

5. Indicate Type of Lease
FED ☐ STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

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

8. Well No. 223

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 ☐ Gas Well ☐ 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 F 2630 Feet From The NORTH Line and 1420 Feet From The WEST Line
Section 32 Township 18S Range 38E NMPM LEA County

10. Elevation (Show whether DF, RKB, RT GR, etc.)
3634 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"/>	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: Acidize and change equipment to prepare For CO2 and Water injection. <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. RUPU. Pull injection equipment.
2. Stimulate perms with 1800g 15% NEFE HCL acid.
3. Change wellhead, tubing, and packer.
4. Set Guiberson 7" pkr @4044'.
5. Bottom of tbq @4044'. 131 jts 2-7/8" Duoline tbq.
6. Circ csg w/pkr fluid.
7. Test csg to 1000 psi for 30 min and chart for the NMOCD.

Well returned to injection 01/29/2003.

Rig up date: 01/22/2003

Rig down date: 01/28/2003

Injection permitted under Division Rule R-6199-B, page 12.

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

SIGNATURE Robert Gilbert TITLE SR. ENGR TECH DATE
TYPE OR PRINT NAME Robert Gilbert TELEPHONE NO. 505/397-8206

(This space for State Use)

APPROVED BY GARY W. WINK TITLE DATE FEB 20 2003
CONDITIONS OF APPROVAL IF ANY: OC FIELD REPRESENTATIVE II/STAFF MANAGER

