State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

FILE IN TRIPLICATE	OIL CONSERV	ATION DIVISION		
<u>DISTRICT I</u>	2040 Pacheco St. Santa Fe, NM 87505		WELL API NO.	
P.O. Box 1980, Hobbs, NM 88240			30-025-34869	
<u>DISTRICT II</u>			5. Indicate Type of Lease	
811 S. 1st Street, Artesia, NM 88210			FED STATE	FEE X
DISTRICT III			6 State Oil & Gas Lease No.	
1000 Rio Brazos Rd, Aztec, NM 87410				
SUNDRY NOTICES AND REPORTS ON WELLS				
(DO NOT USE THIS FORM FOR PROPOSALS 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:	1 C-10 (POR SOCITI KOI OSALS.)		NORTH HODDS (0/5A)	OINII
Oil Well X	Gas Well Other			
2. Name of Operator			8. Well No. 623	
Occidental Permian, LTD				
3. Address of Operator			9. Pool name or Wildeat	HOBBS (G/SA)
1017 W. Stanolind Rd., HOBBS,	NM 88240 505/3	97-8200		
4. Well Location				· ·
Unit Letter K : 1837	Feet From The SOUTH	Line and <u>2482</u>	Feet From The WEST	Line -
Section 29	Township 18S	Range 3	8E NMPM	LEA County
	10. Elevation (Show whether DF, R			
	3645 GL			
11. Chec	ek Appropriate Box to Indicate N	lature of Notice, Report, or	r Other Data	
NOTICE OF INT	ENTION TO:	SU	BSEQUENT REPORT OF	= ;
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING	CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING C	DPNS DPNS PLUG & A	BANDONMENT
		CASING TEST AND CEM		
PULL OR ALTER CASING	[[[11, 10]	
OTHER: Re-Completion	X	OTHER:		L
12. Describe Proposed or Completed Operation	ons (Clearly state all pertinent details, ar	nd give pertment dates, including	g estimated date of starting any prop	osed work)
SEE RULE 1103.				
1. Set CIBP ±4040 over San Andre	S			
2. Perforate Grayburg at 3920-34.				
3. Frac treat new perfs.				
4. Run production equipment.				
\wedge ν				
I hereby certify that the information above is	true and complete to the best of my know	ledge and belief.		
			R DATI	7-19-01
SIGNATURE V	, ,-0	TTILE PROD ENGI		
TYPE OR PRINT NAME D. NELSON	<u> </u>		TELEPHONE NO.	505/397-8200
(This space for State Use)				
APPROVED BY		TTTLE	DAT	E

CONDITIONS OF APPROVAL IF ANY:

