

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. 30-025-34871		
5. Indicate Type of Lease FED <input type="checkbox"/> STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>		
6. State Oil & Gas Lease No.		
7. Lease Name or Unit Agreement Name NORTH HOBBS (G/SA) UNIT		
8. Well No. 813		
9. Pool name or Wildcat HOBBS (G/SA)		
10. Elevation (Show whether DF, RKB, RT GR, etc.) 3644 GL		

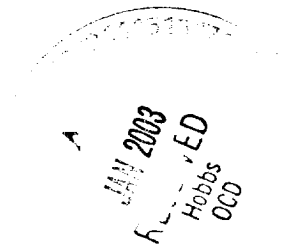
<p align="center"><b>SUNDRY NOTICES AND REPORTS ON WELLS</b></p> <p align="center">(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101 FOR SUCH PROPOSALS.)</p>			
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other T A'd			
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>L</u> : <u>1450</u> Feet From The <u>SOUTH</u> Line and <u>469</u> Feet From The <u>WEST</u> Line Section <u>29</u> Township <u>18S</u> Range <u>38E</u> NMPM LEA County			
10. Elevation (Show whether DF, RKB, RT GR, etc.) 3644 GL			

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
<p align="center"><b>NOTICE OF INTENTION TO:</b></p> <p>PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/></p> <p>TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/></p> <p>PULL OR ALTER CASING <input type="checkbox"/></p> <p>OTHER: <u>Convert to CO2 and Water Injection</u> <input checked="" type="checkbox"/></p>	<p align="center"><b>SUBSEQUENT REPORT OF:</b></p> <p>REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/></p> <p>COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG &amp; ABANDONMENT <input type="checkbox"/></p> <p>CASING TEST AND CEMENT JOB <input type="checkbox"/></p> <p>OTHER: <input type="checkbox"/></p>

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. Drill out plug at 4050.
2. Run injection equipment.
3. Circulate packer fluid and notify NMOCD of packer test.

Injection permit per Admin Order PMX-219 and Division Rule R-6199-B



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

SIGNATURE D. Nelson TITLE PROD ENGR DATE 1/10/03  
TYPE OR PRINT NAME D. NELSON TELEPHONE NO. 505/397-8200

(This space for State Use)

APPROVED BY \_\_\_\_\_ DATE JAN 14 2003  
CONDITIONS OF APPROVAL IF ANY: