DEPARTME	OF THE INTE	RIORN.M. OILC		Expires	July 31, 1996	
BUREAU OF L SUNDRY NOTICES	AND MANAGE	MENT 1625 N. F	rench Dr.	5. Lease Serial No		
SUNDRY NOTICES	AND REPORTS	ON WELLS	1 88240	IC-()32233 (A)	
SUNDRY NOTICES Do not use this form for abandoned well. Use Forr	proposals to drill or n 3160-3 (APD) for	to re-enter an such proposals.		6. If Indian, Allott	ee or Tribe Name	
SUBMIT IN TRIPLICATE	- Other instructions	on reverse side		7. If Unit or CA/A	greement, Name and/or No.	
1. Type of Well X Oil Gas Well Other				1	8. Well Name and No.	
Well Well Other				- North Hobbs Unit	s G/SA No. 813	
	ccidental Permian Limited Partnership Attn: Mark Stephens, 338-B			9. API Well No.		
Ba. Address P.O. Box 4294, Houston, TX 77210-4294 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)		3b. Phone No. (<i>include area code</i>) (281) 552-1158		30-025-34871 10. Field and Pool, or Exploratory Area		
		/ <u>\=;=/_</u> _;==			ourg - San Andres	
Letter L. 1450' FSL x 469' FWL. S	ес. 29. т-18-5.	R-38-E		11. County or Par	ish. State	
Letter L, 1450' FSL x 469' FWL, Sec. 29, T-18-S, H				Lea Co. NM		
12. CHECK APPROPRIA	ATE BOX(ES) TO IN	IDICATE NATURE OF N	OTICE, REPOR	T, OR OTHER DA	.TA	
TYPE OF SUBMISSION		TY	PE OF ACTION			
Notice of Intent	Acidize	Deepen	Productio	n (Start/Resume)	Water Shut-Off	
	Alter Casing	Fracture Treat	Reclamati	ion	Well Integrity	
X Subsequent Report	Casing Repair	New Construction	Recomple	ete	X Other Completion	
Final Abandonment Notice	Change Plans	Plug and Abandon	Temporar	rily Abandon		
Fillal Abandolinicati Notice	Convert to Injecti	on Plug Back	Water Dis	sposal		
testing has been completed. Final Abandonment N determined that the final site is ready for final inspect	ion)	ny aner an requirements, inc	nuung reciamane	on, have been comp	iereu, and the operator has	
6/26/00 - 6/28/00:	ion.,		-			
6/26/00 - 6/28/00: MI x RU completion unit. Perform acidize 4100' - 4288' with 4200 battery. Test well on 6/29/00: 42 BO x 29	ate 4100' - 4288 gal. 15% HCL. F	an production equi	ee phasing.	um well over	con and	
MI x RU completion unit. Perform acidize 4100' - 4288' with 4200 battery.	ate 4100' - 4288 gal. 15% HCL. F	an production equi	ee phasing. pment and t	um well over	con and	
MI x RU completion unit. Perform acidize 4100' - 4288' with 4200 battery. Test well on 6/29/00: 42 BO x 29 14. Ihereby certify that the foregoing is true and correct Name (Printed/Typed)	ate 4100' - 4288 gal. 15% HCL. F 9 MCF x 2214 BW	an production equi	ee phasing. pment and t	um well over	con and	
MI x RU completion unit. Perform acidize 4100' - 4288' with 4200 battery. Test well on 6/29/00: 42 BO x 29 14. Ihereby certify that the foregoing is true and correct Name (Printed/Typed)	ate 4100' - 4288 gal. 15% HCL. F	am production equi	ee phasing. pment and t	Num well over	con and	
MI x RU completion unit. Perform acidize 4100' - 4288' with 4200 battery. Test well on 6/29/00: 42 BO x 29 14. Thereby certify that the foregoing is true and correct Name (Printed/Typed) Marck Stephens March	ate 4100' - 4288 gal. 15% HCL. F 9 MCF x 2214 EW K <i>Steplum</i>	Title Bate C	ee phasing. pment and t	Num well over	con and	
MI x RU completion unit. Perform acidize 4100' - 4288' with 4200 battery. Test well on 6/29/00: 42 BO x 29 14. Thereby certify that the foregoing is true and correct Name (Printed/Typed) Marck Stephens March	ate 4100' - 4288 gal. 15% HCL. F 9 MCF x 2214 EW K <i>Steplum</i>	Title Date CO	ee phasing. pment and t	Lyst (SG)	con and c to	
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MI x RU completion unit. Perform acidize 4100' - 4288' with 4200 battery. Test well on 6/29/00: 42 BO x 29 14. Thereby certify that the foregoing is true and correct Name (Printed/Typed) Marck Stephens March THE	ate 4100' - 4288 gal. 15% HCL. F MCF x 2214 EW KStephens S SPACE FOR FE	Title Date C Title Date C DERAL OR STATE OF	ee phasing. pment and t	Lyst (SG)	con and c to	
MI x RU completion unit. Perform acidize 4100' - 4288' with 4200 battery. Test well on 6/29/00: 42 BO x 29 14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) Mark Stephens Mark THE Approved by Conditions of approval if any, are attached. Approval of	ate 4100' - 4288 gal. 15% HCL. F MCF x 2214 EW KStephum S SPACE FOR FEI	Title Date (C) DERAL OR STATE OF bject lease Office	ee phasing. pment and t	lyst (SG)	con and c to	



KEY ENERGY DRILLING, INC. P.O. Box 1295 Midland, Texas 79702 Phone 915-570-0494 Fax 915-570-0465

To Whom It May Concern:

RE: STATE OF NEW MEXICO OIL AND GAS DIVISION INCLINATION REPORT

Lease Name:NORTH HOBBS UNITWell Number:29-813County/State:LEA NMOperator:OCCIDENTAL PERMIAN, LTD(Operator No. 617544)Address:P.O. BOX 4294Address:HOUSTON, TX 77210-4294Address:ATTN: MARK STEPHENSLocation:Location:

I, CHOYR GILBERT, Contract Manager for Key Energy Drilling, Inc., PO Box 1295, Midland, TX 79702, declare that I am authorized to make this certification, that I have personal knowledge of the inclination data and facts placed on this form and that such data and facts are true, correct, and complete to the best of my knowledge.

Sworn to and Subscribed Before Me by the said

CHOYR GILBERT Contract Manager

Sighature of Notary Public In and for the State of Texas

LORETTA J. HENDERSON Print Name of Notary Public

This the $\underline{19TH}$ day of _ 2000



FIELD NAME Hobbs; Grayburg-San Andres	LEASE NAME NORTH HOBBS G/SA Unit	WELL NUMBER 813		
OPERATOR		COUNTY	 	
OCCIDENTAL PERMIAN Limited Partnership		LEA		
ADDRESS P.O. BOX 4294, HOUSTON, TX 772	1-4294 ATTN: MARK STEPHENS			
		~		

RECORD OF INCLINATION

Letter L, 1450' FSL x 469' FWL, Sec. 29, T-18-S, R-38-E

	COURSE LENGTH			COURSE	
MEASURED DEPTH FEET	HUNDREDS OF	ANGLE OF INCLINATION		DISPLACEMENT	ACCUMULATIVE
		DEGREE		FEET	DISPLACEMENT
285	2.85	1.00	1.75	4.97	4.97
611	3.26	0.75	1.31	4.27	9.24
911	3.00	1.00	1.75	5.24	14.48
1158	2.47	1.00	1.75	4.31	18.79
1504	3.46	1.25	2.18	7.55	26.34
2003	4.99	1.00	1.75	8.71	35.04
2500	4.97	1.25	2.18	10.84	45.89
2996	4.96	1.00	1.75	8.66	54.54
3496	5.00	1.50	2.62	13.09	67.63
3996	5.00	1.00	1.75	8.73	76.36
4400	4.04	1.00	1.75	7.05	83.41
	-44.00		0.00	0.00	83.41
	0.00		0.00	0.00	83.41
	0.00		0.00	0.00	83.41
	0.00		0.00	0.00	83.41
	0.00		0.00	0.00	83.41
	0.00		0.00	0.00	83.41
	0.00		0.00	0.00	83.41
	0.00		0.00	0.00	83.41
	0.00		0.00	0.00	83.41
	0.00		0.00	0.00	83.41
	0.00		0.00	0.00	83.41
	0.00		0.00	0.00	83.41
	0.00		0.00	0.00	83.41
	0.00		0.00	0.00	83.41
	0.00		0.00	0.00	83.41
	0.00		0.00	0.00	83.41
	0.00		0.00	0.00	83.41
	0.00		0.00	0.00	83.41
	0.00		0.00	0.00	83.41
	0.00		0.00	0.00	83.41
	0.00		0.00	0.00	83.41
	0.00		0.00	0.00	83.41

THIS INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

CHOYR GILBERT - CONTRACT MANAGER	(915) 570-0494
NAME OF PERSON AND TITLE	TELEPHONE NUMBER
Mintat	KEY ENERGY DRILLING, INC.
SIGNATURE OF ADMORIZED REPRESENTATIVE	NAME OF COMPANY
SIGNATURE OF AUTHORIZED REPRESENTATIVE	NAME OF COMPANY