

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

OIL CONSERVATION DIVISION

DISTRICT I
P.O. Box 1980, Hobbs NM 88241-1980

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO.
30-025-34997

5. Indicate Type of Lease
STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

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

2. Name of Operator
Occidental Permian Limited Partnership

3. Address of Operator
P.O. Box 4294, Houston, TX 77210-4294

4. Well Location
Unit Letter **H** : **2630** Feet From The **North** Line and **318** Feet From The **East** Line

Section **33** Township **18-S** Range **38-E** NMPM **Lea** County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3630' GL

7. Lease Name or Unit Agreement Name
North Hobbs G/SA Unit

8. Well No.
543

9. Pool name or Wildcat
Hobbs; Grayburg - San Andres

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: **Spud & Run Surface Casing** ☒

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.

7/15/00: MI x RU. Spud 12-1/4" hole @ 06:00 hours (NMOCD notified)

7/16/00 -

7/17/00: Run 40 jts. 8-5/8", 24#, J-55, ST&C casing with 10 centralizers and set at 1622'. Cement with 500 sx. PBCZ (lead) and 225 sx. PBCZ tail. Plug down x circulate 9 sx. to pit. WOC. Cut off casing, weld on wellhead, x test wellhead to 950 psi. NU BOP.

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

SIGNATURE Mark Stephens TITLE Business Analyst (SG) DATE 07/18/2000

TYPE OR PRINT NAME Mark Stephens TELEPHONE NO. 281/552-1158

(This space for State Use)

APPROVED BY _____ TITLE DISTRICT SUPERVISOR DATE 7/20/00

CONDITIONS OF APPROVAL, IF ANY:

ORIGINAL FILED BY DENIS WILLIAMS
DISTRICT SUPERVISOR