

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.	30-025-07656
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	SOUTH HOBBS (G/SA) UNIT
8. Well No.	070
9. Pool name or Wildcat	HOBBS (G/SA)

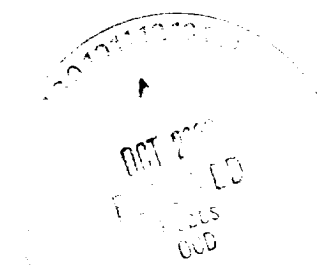
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101 FOR SUCH PROPOSALS.)	
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other T&A'd Well	
2. 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>H</u> : <u>1650</u> Feet From The <u>NORTH</u> Line and <u>990</u> Feet From The <u>EAST</u> Line Section <u>8</u> Township <u>19S</u> Range <u>38E</u> NMPM LEA County	
10. Elevation (Show whether DF, RKB, RT GR, etc.) 3608' 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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG & ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input 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.

Notify the NMOCD 24 hr before job. (393-6161)

Well is a TA'd well. CIBP set @3985'. Capped w/sand to PBTD @3970'.
Spot 35' cmt from 3970' to 3935'. Tag TOC.
Circ Mud Gel from 3935' to 2725'.
Spot cmt from 2725' to 2475'. Bot of Anhy @2600'. ** Top of cmt on 5.5" prod csg @3330'.
Circ Mud Gel from 2600' to 1725'.
Spot cmt from 1725' to 1475'. Top of Anhy @1600'.
Circ Mud Gel from 1475' to 350'.
Perforate sqz hole @350'. Circ cmt to surface.
Spot cmt from 350' to 200'. Bot of 8-5/8" csg @337'.
Spot Mud Gel from 200' to 60'.
Spot Cmt from 60' to surface. ** If cmt does not circ from 350' spot cmt in csg from 350' to surface.
Cut off wellhead and install dry hole marker.



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 10/11/2002
TYPE OR PRINT NAME Robert Gilbert TELEPHONE NO. 505/397-8206

(This space for State Use) ORIGINAL SIGNED BY
APPROVED BY GARY W. WINK TITLE OC FIELD REPRESENTATIVE II/STAFF MANAGER DATE OCT 11 2002
CONDITIONS OF APPROVAL IF ANY:

THE OPERATOR SHALL BE NOTIFIED 24 HOURS BEFORE THE BEGINNING OF PLANNING OPERATIONS ON THE C-103 FORM.

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