State of New Mexico

Energy, ...inerals and Natural Resources Department

<u>DISTRICT I</u>	OIL CONSERVATION DIVISION	
1625 N. FRENCH DRIVE, HOBBS, NM 88240	310 Old Santa Fe Trail, Room 206	WELL API NO. 30-025-07700
	Santa Fe, New Mexico 87503	5. Indicate Type of Lease
		FED STATE FEE X
		6. State Oil & Gas Lease No.
SUNDRY NOTICES A	ND REPORTS ON WELLS	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
(DO NOT USE THIS FORM FOR PROPOSALS	TO DRILL OR TO DEEPEN OR PLUG BACK TO A SE "APPLICATION FOR PERMIT"	7. Lease Name or Unit Agreement Name SOUTH HOBBS (G/SA) UNIT
	R SUCH PROPOSALS.)	SOUTH HODDS (G/SA) CIVIT
1. Type of Well:		
	Well Other INJECTOR(SHUT IN)	8. Well No. 98
2. Name of Operator OCCIDENTAL PER	KMIAN LID.	6. Wei No. 96
3. Address of Operator 1017 W. STANOLI	ND RD.	9. Pool name or Wildcat
		HOBBS (G/SA)
4. Well Location		
Unit Letter A : 330 Feet F	from The NORTH Line and 330 F	eet From The EAST Line
om Zetter A . 350 rect.		
Section 16	Township 19-S RANGE 38 evation (Show whether DF, RKB, RT GR, etc.)	-E NMPM LEA County
10. El 3614		
11. Check Appropriate Check Ap	oriate Box to Indicate Nature of Notice, Report	, or Other Data
NOTICE OF INTENTION	TTO: SUI	BSEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG	1 1 1	ALTERING CASING
ABANI		DPNS. PLUG & ABANDONMEN'T
	GE PLANS COMMENCE DRILLING C	
PULL OR ALTER CASING	CASING TEST AND CEMI	
OTHER:	OTHER: Requesting T	
12. Describe Proposed or Completed Operations (Cleawork) SEE RULE 1103.	arly state all pertinent details, and give pertinent dates, in	cluding estimated date of starting any proposed
TEST DATE: 05/10/02		
PACKER DEPTH: 4002'		william to the
		Carrier Contract Cont
PRESSURE READING: INITIAL - 545 PS	I; 15 MIN – 545 PSI; 30 MIN – 545 PSI	
A ENGRE OF PRESCRIPE DE A DING. 20 M	IIN /	ED TO THE STATE OF
LENGTH OF PRESSURE READING: 30 M		Sobs 30
TEST WITNESSED: YES		1 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
		1
· · · · · · · · · · · · · · · · · · ·	bandonment Expires	3 07
	Dalidolandic Expires	
I hereby certify that the information above is true and	complete to the best of my knowledge and belief.	
SIGNATURE Steve W	TITLE ENGINEERI	NG TECH DATE 07/17/02
TYPE OR PRINT NAME STEVE W IONES		TELEPHONE 505/397-8228
TYPE OR PRINT NAME STEVE W JONES		TELEPHONE 505/397-8228 NO.
TYPE OR PRINT NAME STEVE W JONES (This space for State Use)		
	TTFLE	NO.
(This space for State Use)		

