State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

FILE IN TRIPLICATE	OIL CONSERV	ATION DIVISION		
DISTRICT I	2040 Pacheco St. Santa Fe, NM 87505		WELL API NO.	
P.O. Box 1980, Hobbs, NM 88240			30-025-31419	
DISTRICT II			5. Indicate Type of Lease	
811 S. 1st Street, Artesia, NM 88210			6. State Oil & Gas Lease No.	
DISTRICT III 1000 Rio Brazos Rd, Aztec, NM 87410			6. State Off & 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			7. Lease Name or Unit Agreement Name	
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"				
(FORM C-101 FOR SUCH PROPOSALS.)			SOUTH HOBBS (G/SA) UNIT	
Type of Well: Oil Well X	Gas Well Other			
2. Name of Operator	Gas Well Other		8. Well No. 232	
OCCIDENTAL PERMIAN L	TD.		232	
3. Address of Operator			9. Pool name or Wildcat	HOBBS (G/SA)
1017 W. Stanolind Rd., HOBE	S, NM 88240 505/39	97-8200		
/ -			E a 57	
Unit Letter 1710	Feet From The NORTH	Line and 1630 Fee	et From The WEST	— Line
Section 4	Township 19S	Range 38E	E NMPM	LEA County
	10. Elevation (Show whether DF, R.	KB, RT GR, etc.)		
11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data				
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERIN	G CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING OF	PNS. PLUG &	ABANDONMENT
PULL OR ALTER CASING]	CASING TEST AND CEMEI	NT JOB	
OTHER: Stimulate San Andres	X	OTHER:		
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. Pull production equipment.				
2. Stimulate with acid, perfs 4087-4234				
3. Run production equipment.				
\wedge				
I hereby certify that the information above	is true and complete to the best of my know	ledge and helief		
Thereby centry that the first first above	Thrue and complete to the best of the know	leage and benefit		2 22 2
SIGNATURE SIGNATURE		TITLE PROD ENGR	DAT	E 3-23-01
TYPE OR PRINT NAME D. NELS	ON		TELEPHONE NO	505/397-8200
(This space for State Use)				MAR 23. 2001
APPROVED BY		TITLE	DAT	E
CONDITIONS OF APPROVAL IF ANY:		www.gr/	4	
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