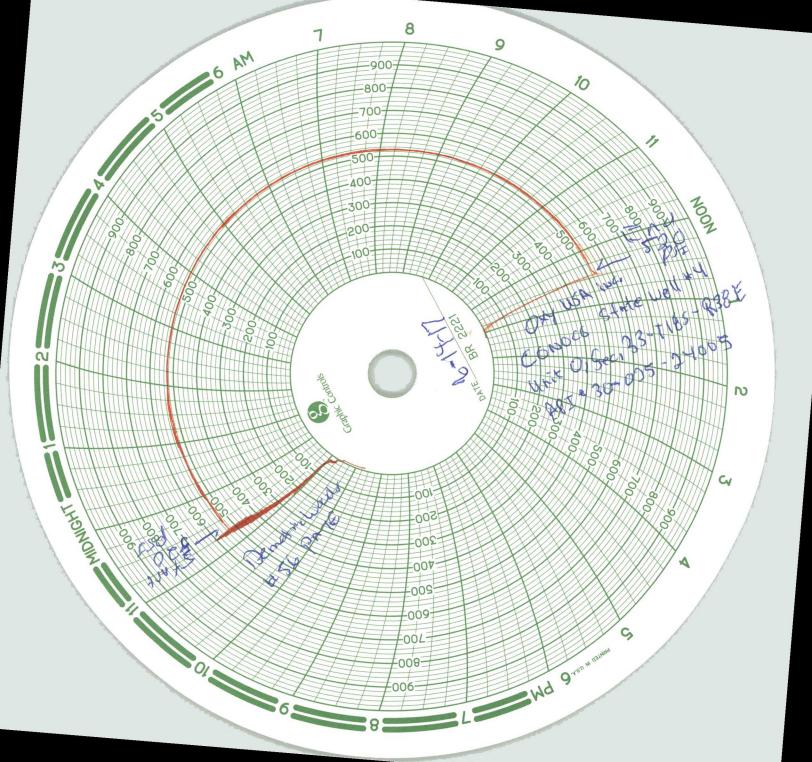
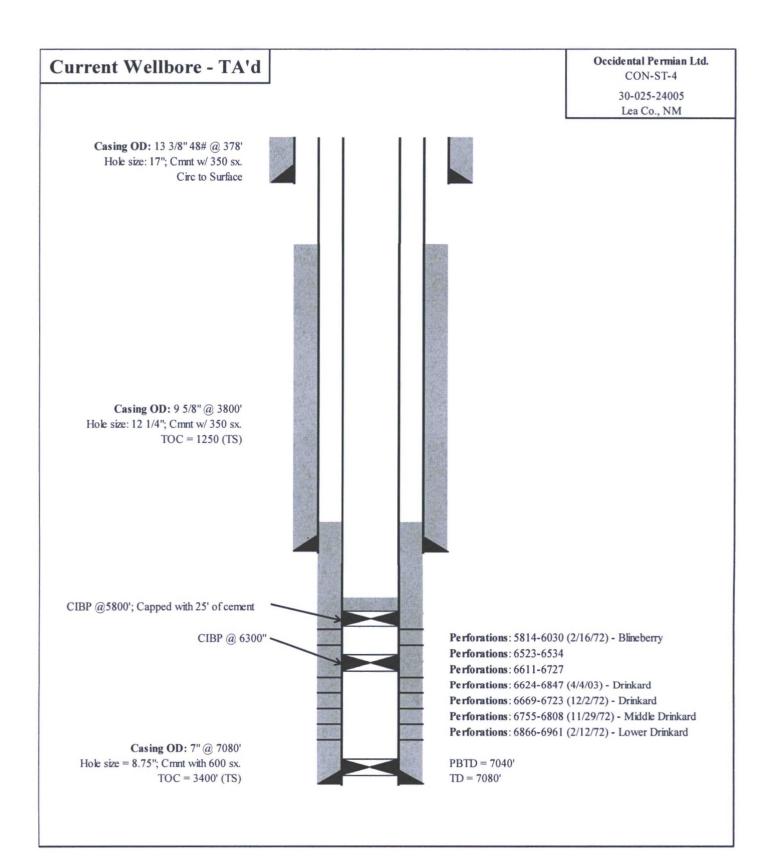
Submit 1 Copy To Appropriate District State of New Mexico	Form C-103					
District I – (575) 393-6161 Energy, Minerals and Natural Resources	Revised July 18, 2013 WELL API NO.					
District II – (575) 748-1283 811 S. First St., Artesia, NM 88210	30-025-24005					
District III – (505) 334-6178 (1220 South St. Francis Dr.	5. Indicate Type of Lease STATE FEE					
Santa He NIVI X / SUS	6. State Oil & Gas Lease No.					
District IV – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM						
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSILS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH	7. Lease Name or Unit Agreement Name Conoco State					
PROPOSALS.)	8. Well Number 4					
 Type of Well: Oil Well S Gas Well Other Temporarily Abandoned Name of Operator 	9. OGRID Number 16696					
Occidental Permian, Ltd /	10. Pool name or Wildcat					
3. Address of Operator HCR 1 Box 90 Denver City, TX 79323	Hobbs (G/SA)					
4. Well Location						
Unit Letter O : 688 feet from the South line and 2	111 feet from the East line					
Section 33 Township 18-S Range 38-E	NMPM Lea County					
11. Elevation (Show whether DR, RKB, RT, GR, etc.						
3626' GR						
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data						
	REQUENT REPORT OF					
NOTICE OF INTENTION TO: SUE						
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMEN	Т ЈОВ					
CLOSED-LOOP SYSTEM	Integrity Test/TA status request					
13. Describe proposed or completed operations. (Clearly state all pertinent details, and						
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of						
proposed completion or recompletion.						
Date of test: 06/14/2017						
Pressure readings: Initial - 520 PSI Ending - 520 PSI						
Length of test: 30 minutes						
Witnessed: NO	1 Tr					
This Approval of Temporary						
Abandonment Expires 6/14/2019						
Spud Date: Rig Release Date:						
I hereby certify that the information above is true and complete to the best of my knowledge and belief.						
The second						
SIGNATURE NEW CILCONNETTILE Admin. Associate						
	DATE 06/20/2017					
Type or print name Mendy A. Johnson E-mail address: mendy_johns						
Type or print name Mendy A. Johnson E-mail address: mendy_johns For State Use Only A. Johnson A. Johnson A. Johnson Mendy A. Johnson						
For State Use Only Adu ABIOUM ADIT	on@oxy.com PHONE: 806-592-6280					





American Valve & Meter, Inc.

1113 W. BROADWAY

P.O. BOX 166 HOBBS, NM 88240

T0: PATE TRUCKIG

DATE:05/12/17

This is to certify that:

I, R L Larmon, Technician for American Valve & Meter Inc. has checked the calibration of the following instrument.

8" Pressure recorder

Ser# 4842

at these points.

Pressure #		*	* Pressure #		
Test	Found	Left	Test	Found	Left
- 0	-	- 0	-	-	-
- 500	- S	- 500	-	-	-
- 700	- A	- 700	-	-	-
- 1000	- M	- 1000	-	-	-
- 200	- E	- 200	-	-	-
- 0	-	- 0	-	-	-

Remarks:

Signature: RLL