

Submit 1 Copy To Appropriate District Office
 District I - (575) 393-6161
 1625 N. French Dr., Hobbs, NM 88240
 District II - (575) 748-1283
 811 S. First St., Artesia, NM 88210
 District III - (505) 334-6178
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV - (505) 476-3460
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised July 18, 2013

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

WELL API NO. 30-025-05463
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 19552
7. Lease Name or Unit Agreement Name North Hobbs Unit (G/SA)
8. Well Number 321
9. OGRID Number 157984
10. Pool name or Wildcat Hobbs (G/SA)
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3688' KB

SUNDRY NOTICES AND REPORTS ON WELLS
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR TIE BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well Gas Well Other Injector

2. Name of Operator
Occidental Permian Ltd

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

4. Well Location
 Unit Letter G : 1650 feet from the North line and 1650 feet from the East line
 Section 23 Township 18S Range 37E NMPM County Lea

HOBBS OGD
 JUL 13 2017
 RECEIVED

12. 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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL. <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

MIRU x NDWH x NUBOP. Check psi, 500 psi on tbg, 100 psi on csg. Pumped 50 bbls BW x pressure tested csg to 600 psi x lost 100 psi in 30 min. RIH 1.50" blanking plug in pkr @ 4212'. POOH x pressure tested tbg to 1600 psi x held good. POOH on/off tool x circulated well w 85 bbls BW. Pressure tested csg to 600 psi x gained 20 psi. RIH 3 7/8" bit x tagged TD @ 4385'. Checked psi, 0 psi on tbg, 0 psi on csg. RIH 4 1/2" inj pkr @ 4214' x circulate well w/ 100 bbls pkr fluid. RIH 4 1/2" on/off tool @ 4207' x 130 2-3/8" jts of duoline tbg @ 4206'. Ran MIT x passed - Chart attached. RD x NDBOP x NUWH.

Spud Date: 05/05/17 Rig Release Date: 05/10/17

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

SIGNATURE April Hood TITLE Regulatory Specialist DATE 07/11/2017

Type or print name April Hood E-mail address: April_Hood@Oxy.com PHONE: 713-366-5771

APPROVED BY: Malay B Brown TITLE AO/II DATE 7/13/2017

Conditions of Approval (if any):

REDMS - CHART - ✓

PRINTED IN U.S.A.

88 MIN

96 MIN

START

8 MIN

16 MIN

24 MIN

32 MIN

40 MIN

48 MIN

56 MIN

64 MIN

72 MIN

80 MIN

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