

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

**HOBBS OGD**

DEC 19 2017

RECEIVED

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

*Record Clean-Up*

WELL API NO.  
30-025-43842

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

North Hobbs (G/SA) Unit

8. Well Number 658

9. OGRID Number  
157984

10. 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 ☐ Gas Well ☐ Other ☐ Injector ☒

2. Name of Operator  
Occidental Permian Ltd.

3. Address of Operator  
PO Box 4294 Houston, TX 77210

4. Well Location

Unit Letter B : 160 feet from the N line and 2199 feet from the E line  
Section 24 Township 18S Range 37E NMPM County Lea

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3675'

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐  
DOWNHOLE COMMINGLE ☐  
CLOSED-LOOP SYSTEM ☐  
OTHER: RECLASS TO INJECTOR ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐  
OTHER: ☐

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.

This is a notice of intent to reclass well from producer to injector. ☒

Injection order covering unit on Order No. R-6199 (Case No. 15103).

Spud Date:

Rig Release Date:

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 12/19/17

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

**For State Use Only**

APPROVED BY: Mailey Brown TITLE AO/II DATE 12/19/2017

Conditions of Approval (if any):

District I  
1625 N. French Dr., Hobbs, NM 88240  
Phone: (575) 393-6161 Fax: (575) 393-6162  
District II  
911 S. First St., Artesia, NM 88210  
Phone: (575) 746-1283 Fax: (575) 746-9720  
District III  
1000 Rio Chisum Road, Aztec, NM 87410  
Phone: (505) 334-6176 Fax: (505) 334-6177  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505  
Phone: (505) 476-3460 Fax: (505) 476-3461

**HOBBS OGD**

DEC 19 2017

RECEIVED

State of New Mexico  
Minerals & Natural Resources Department  
OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-102  
Revised August 1, 2011  
Submit one copy to appropriate  
District Office

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number	Pool Code	Pool Name
Property Code	Property Name <b>NORTH HOBBS G/SA UNIT</b>	Well Number <b>658</b>
OGRID No.	Operator Name <b>OCCIDENTAL PERMIAN LTD.</b>	Elevation <b>3674.8'</b>

Surface Location

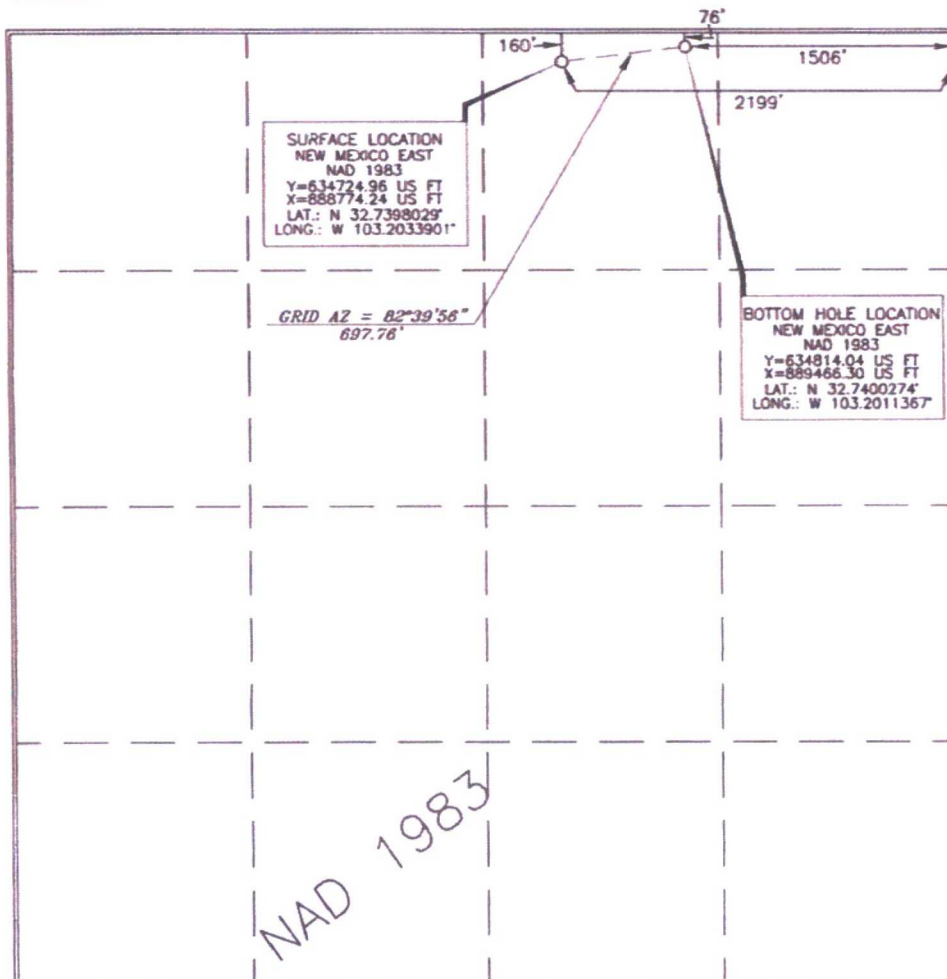
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
B	24	18 SOUTH	37 EAST, N.M.P.M.		160'	NORTH	2199'	EAST	LEA

Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
B	24	18 SOUTH	37 EAST, N.M.P.M.		76'	NORTH	1506'	EAST	LEA

Dedicated Acres	Joint or Infill	Consolidation Code	Order No.
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No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.



OPERATOR CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or undivided mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order

hereby entered by the division

*April Hood* 12/19/17  
Signature  
Printed Name  
April - Hood@Oxy.com  
E-mail Address

SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief

*ERRY J. ASH*  
15079  
MARCH 24, 2017  
Date of Survey  
Signature and Seal of  
Professional Surveyor

*Tony J. Ash* 5/2/2017  
Certificate Number 15079

WO# 170324WL-e (KA)